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ABSTRACT

Papers are presented from a debate held in 1983 on noncategorical versus categorical programming for behaviorally disordered children and youth. C. Nelson and K. Greenough advocate the noncategorical approach, asserting that categorical approaches can be harmful, are nonfunctional in educational terms, and are less practical than alternative approaches (such as the consulting teacher approach originated in Vermont. S. Huntze and R. Simpson reply that such a noncategorical approach may actually reduce quality services to behaviorally disordered students. They view the implications for teacher education and certification in terms of six issues: political/governmental realities, program quality, the labeling concern, service delivery and consumer factors, personal/social concerns, and categories and communication. Rebuttals to the categorical position focuses on the need to change the system and the problems with existing categorical approaches. Rebuttals to the noncategorical system consider its abuse and assert that labeling should not become the sole basis for the decision. (CL)

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NATIONAL NEEDS ANALYSIS/LEADERSHIP TRAINING PROJECT

NONCATEGORICAL VERSUS CATEGORICAL ISSUES IN PROGRAMMING FOR BEHAVIORALLY DISORDERED CHILDREN AND YOUTH

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INTRODUCTION

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The papers contained in this monograph were first presented at the Midwest Symposium on Leadership in Behavioral Disorders held in Kansas City, Missouri, February 24-26, 1983. The title of the specific session at which these papers were presented was the "Young and Restless" debate held on the evening of February 24. The debate was planned, organized, and moderated by Reece Peterson and Carl Smith. We were pleased with the quality and thoroughness of the positions presented by the authors and with the number of persons attending the three hour program. While the papers contained in this volume certainly capture the content of the evening, one of the shortcomings of our written language is its inability to capture the excitement that surrounded this type of format in a professional meeting.

How did we decide on such a format and topic? First, we have all been concerned for some time over the dearth of structured "give and take" sessions at our professional meetings. In attending and presenting at such gatherings, ourselves, we have felt fortunate if we found a session that allowed for a true discussion of important issues rather than a singular presentation of an individual point of view. In many cases where such dialogue did occur, it seemed that rather than exchanging ideas the persons involved were attempting to "spread the gospel" of their own point of view and to systematically put down opposing viewpoints. This concern left us with an increased hunger to explore issues via an adversarial format in which the professional and personal needs of the participants did not dominate or obscure an open and honest discussion of the issues at hand. As you read these papers you will note that the affirmative and negative positions are certainly at odds;

this was intentionally solicited so as to best view the issues at hand.

Thus, we felt that there was a need for the use of an alternative structure to explore the value issues we face in the field of behavioral disorders. We had all been exposed to or participated in the debate format in our high school or collegiate experiences and felt that this format might be appropriate and applicable to an issue such as the one discussed in this monograph. Our field has numerous issues that, while we continue to seek empirical data to guide our path, are largely resolved at the policy and programmatic levels by what professionals and parents <u>believe</u> is the appropriate direction to move. For example, Frank Wood (1977), in looking at the issues surrounding the return of behaviorally disordered students from special to regular education classes concluded:

> The <u>strongest</u> support for the concept of mainstreaming at present is rational: legal and ethical. Research evidence in my opinion, is neither stronger nor weaker than the evidence for and against the efficacy of the special class (p. 93).

As the authors of the papers in this monograph point out, we are affected today by a similar lack of empirical data to guide our decisions regarding noncategorical versus categorical services to behaviorally disordered children and youth. Yet this topic permeates our work on behalf of students called behaviorally disordered whether we are teacher educators, state department or intermediate unit persons, administrators or direct service professionals; *ergo,* the selection of this topic for the debate and this monograph.

The debate format is certainly threatening! After all, this did, for all intents and purposes, set up the participants to be openly challenged by their colleagues. Fortunately, we were able to convince four distinguished colleagues to agree to this format. And, as mentioned earlier, these persons agreed to present the extremes of each position, all the while realizing that their own views might be somewhat less extreme than those required in a debate

format. We observed a truly professional interchange that included challenges from the opposing sides yet a mutual respect that permeated the proceedings.

The affirmative and negative chapters of this document are co-authored by the representatives of the teams participating in the debate and closely parallel the proceedings of the debate itself. These are followed by individual response papers written by each of the four debaters. These papers taken collectively discuss many issues surrounding our decisions to pursue categorical or noncategorical approaches to programming for behaviorally disordered youth. Videotapes of the actual debate and rebuttal are available from Dr. Reece Peterson, Department of Special Education, 104 Barkley Center, University of Nebraska-Lincoln.

In conclusion, we believe that one of the professional vulnerabilities to which we are all prone is to stake out at an early stage in our careers our professional biases on topics such as the one discussed in this monograph. After all, we all seek to reduce cognitive dissonance and may opt to selectively add data to support these initial positions and to simultaneously ignore nonsupportive data. As John Kenneth Galbraith once quipped, "Faced with having to change our views or prove that there is no need to do so, most of us get busy on the proof" (Ferguson, 1980). This may lead to a professional fear of stating "I used to believe". It is our hope that, regardless of where you presently stand on the issues of categorical versus noncategorical delivery of services to behaviorally disordered youth, this volume will create some "used to believe" in every reader.

REFERENCES

Ferguson, M. The aquarian conspiracy: Personal and social transformation in the 1980s. Los Angeles, California: J. P. Tarcher, Inc., 1980.

Wood, F.H. Implications for leadership training. In mainstreaming emotionally disturbed children, edited by A.J. Pappanikou and J.A. Paul. Syracuse, New York: Syracuse University Press, 1977.

THE CASE FOR NONCATEGORICAL EDUCATIONAL PROGRAMMING FOR BEHAVIORALLY DISORDERED CHILDREN AND YOUTH

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There is a logical fallacy to advocating in favor of noncategorical education for students exhibiting disordered behavior, and that is, if education were truly noncategorical, a school "population" of behaviorally disordered children and youth would not exist! Consequently, support for a noncategorical approach should come from a literature that is noncategorical, or at least, cross-categorical. In this paper, we have drawn upon educational research and scholarly writing representing a variety of areas, most notably labeling, mainstreaming, teacher preparation and certification, and experimental education programs.

In the process of researching our topic, we encountered an observation which also must be obvious to our opponents: empirical support for either a categorical or noncategorical approach to the education of any student population is practically nonexistent (Brito & Reynolds, 1979). True, efficacy studies of special education programs in the 1950's through the 1970's were at least partly responsible for the movement toward noncategorical educational programs for "special" populations (Gross & Gottleib, 1982). However, this research had a categorical basis and subsequent studies have not achieved direct comparisons of noncategorical and categorical approaches employing outcome measures directly related to pupil progress. As a consequence, arguments on both sides of the issue lean toward an emphasis on rhetoric, as opposed to empiricism. Nevertheless, as we will attempt to demonstrate, numerous educational philosophers, scholars, and researchers have aligned themselves clearly on the side of noncategorical programming, and evidence suggests that categorical approaches produce mixed results at

best, whereas the academic progress of students in noncategorical programs is accelerated.

The question we wish to raise is, do pupils need to be given a categorical label such as behaviorally disordered in order to receive appropriate special education services? The issue is not whether discrete handicaps exist, although we would rather easily debate the accuracy of clinical and educational diagnostic procedures designed to identify or discriminate among handicapping conditions. We will attempt to show that categorical approaches to special education cause more harm than good; that categories are nonfunctional for educational purposes; and that alternate approaches are both practical and desirable. The ultimate statement of our position is that labels and categories should be abolished completely. Within the group of noncategorical spokespersons there is disagreement on this stance. Some writers (e.g., Reynolds, 1979) have advocated a generic approach for the so-called mildly handicapped, but a categorical approach for the severely handicapped. Others (e.g., Balow & Balow, 1982) saw no reason to perpetuate severe categorical groupings, such as autism, based on etiology or symptomatology. We concur with both factions that there will continue to be a need for special classes, which are self-contained in some cases, but we side with Balow and Balow's position that access to, and exit from, these programs should be based on functional rather than clinical diagnostic criteria. For example, entry to self-contained classes should be based on the lack of skills necessary to be maintained in a less restrictive program and students should move to a less restrictive placement when they have acquired these skills, which are systematically taught.

Our position will be developed along several lines. First, we will examine factors which have contributed to perpetuating the categorical approach.

Next, we will document some of the many problems associated with this approach. We then will explicate the factors supporting a noncategorical approach, as well as some of the resistances to it. This will be followed by a description of selected examples of noncategorical educational programs. Finally, we will offer some recommendations concerning how noncategorical programming can best be facilitated.

Factors Perpetuating a Categorical Approach

Many opinions have been offered regarding why categorical special education programs have persisted for so long, but most of them are reducible to historical precedent. As Reynolds and Birch (1977) pointed out:

> Special education often sifts children into a variety of "categories": mental retardation, learning disabilities, speech handicaps, emotional disturbance . . . Classroom groups, teacher certification, legislative funding systems, and parent groups have tended to follow the same categorical delineations . . . Regular teachers have learned to refer children according to existing systems of categories, and school psychologists and other personnel workers have performed their functions at the gateways (p. 67).

Heller, McCoy, and McEntire (1979) identified three key components to the categorical versus noncategorical debate:

1. Certification - most states have followed a categorical pattern.
2. Political climate - funding has remained categorical.
3. Training needs - higher education training programs have established categorical territories, which has limited change.

With regard to certification, it appears that categorical practices are beginning to change. Belch (1979) reported the results of a questionnaire survey which indicated that eleven states employed noncategorical certification, twelve states were headed in that direction, and 27 states issued categorical certificates.

On the other hand, funding patterns appear to be more intractable. The majority of states (30) fund special education on the basis of a classroom "unit", defined as an identified number of handicapped children (usually by category) needing services (in some states, a unit is defined in terms of special education personnel instead). Eight states provide aid on the basis of a weighted index; e.g., the weight for "emotionally disturbed" in Florida is 5.09 FTE of the base student allocation. Three states pay the excess costs, over the base student allotment, for handicapped pupils, either in part or in full. Eight states fund the excess costs of an "approved program", which may be defined in terms of the services offered rather than the number of labeled handicapped pupils enrolled (NASDSE, 1982). The influence on service delivery exerted by state funding patterns cannot be overemphasized. As Heller, et al. (1979) observed, "In a sense, the solution to the debate of noncategorical versus categorical is very much in the hands of those who control funds" (p. 9).

Although there is a clear trend toward generic special education teacher training, at least for teachers of the mildly handicapped (Blackhurst, 1981; Lilly, 1979), federal funding for these programs has been predominately categorical. This system creates significant obstacles to training programs seeking to employ a noncategorical approach. Indeed, as Reynolds (1979) pointed out, ". . . the funding system and teacher education programs that are based on categories have themselves become part of the problem rather than part of the solution" (p. 6).

In addition to the influence of teacher certification, state and federal funding, and teacher training, special education practices in the schools have perpetuated a categorical approach. In most school districts, special education exists as a set of separate classrooms, organized by categories of

handicapped pupils served. If a teacher is experiencing a problem with a student, he or she may refer the pupil for special education evaluation. The purpose of this evaluation is to determine whether the student is handicapped (the probability of this finding is greatly increased by the referral, especially if the student is referred because of behavior problems; Ysseldyke & Algozzine, 1982), affix an appropriate diagnostic label, and place the pupil in the classroom designated to serve students with his or her handicap. Reynolds and Birch (1977) observed that such practices have contributed to what they call the "two box theory": special and regular educators and pupils exist in separate environments, using different methods and speaking different languages. Special education functions as a safety valve for the regular program, facilitating the removal of problem students from the mainstream. The practice of referring problem students out of the regular classroom thus is strengthened and maintained by negative reinforcement, i.e., the performance removes an aversive stimulus.

Finally, it has been proposed that categories have been maintained because they provide constructs around which to organize research (Miller & Davis, 1982; Nelson, 1981). Lakin (1982) observed that:

> . . . in approximately 40 percent of the research on childhood behavior disorders, subjects are included by being in a setting or program where all children were assumed merely by their presence to fit the descriptive terminology employed by a researcher; . . . in another 40 percent subjects are included solely on the basis of being nominated by someone as representing whatever category of problem behavior a researcher wishes to examine (p. 16).

There are legitimate reasons for continuing the practice of providing categorical special education services, however. For example, Goldstein (1975) noted the following:

1. Categorical systems specify clear inclusion and exclusion limits, which reduce ambiguity and enhance clear communication.

2. In some cases, categories describe a physical condition having important educational implications.

3. Categories provide a basis for determining which students need special education.

4. Categories provide a system for accounting for the pupils served in special education.

5. Categorical accounting enables school districts to collect state and federal funds.

6. Categories provide a vehicle for obtaining legislative and public support for programs.

Nevertheless, we contend that these "benefits" are, in many cases, false, and are not based on the most desirable educational practices. As we shall document in the next section, the disadvantages of a categorical approach far outweigh any convenience or financial advantage derived from their use.

Problems with the Categorical Approach

The most fundamental concern regarding categorical educational practices is a question of societal values. Cromwell (1975) stated it concisely:

> If the mainstream of our democratic way of life is deemed to be a good one, then we could argue on the basis of value assumptions alone that it is the right of each individual in our society, whether handicapped or not, to share this mainstream good life (p. 43).

Advocates of categorical groupings and educational tracking systems are prone to object that pupils who lack the skills required for participation in the mainstream are better served in segregated programs more suitable to their learning needs, and that such pupils will be unsuccessful and frustrated in the educational mainstream (see Reynolds & Birch, 1977). We concur that the mainstream is not a good experience for everyone; however, if the basis for exclusion is alleged membership in a disability group, as these currently are defined, then segregated programming runs counter to the value assumptions

cited by Cromwell.

Numerous specific objections, both ethical and practical, have been raised against categorical programming in the schools. Blackhurst (1981) listed six groups of problems.

1. The categories are educationally irrelevant.
2. Categorical groupings overlap.
3. Categorical labels imply that the problem is within the child.
4. Instructional materials are not category-specific.
5. Categorical teacher preparation results in course redundancy and professional barriers.
6. Categories are perpetuated by funding practices rather than by educational usefulness.

We will present a brief discussion of the literature pertaining to each of these problems in the following sections.

The Categories are Educationally Irrelevant

Whether practitioners wish to acknowledge it or not, the basis for most of the differential categorical labels in special education is the presumed etiology of the disorder; that is, whether the student's problems are caused by mental retardation, emotional disturbance, learning disabilities, sensory impairments, or a combination of these. As the late Nicholas Hobbs (1978) pointed out, these categories have served clinical purposes reasonably well, but they provide a poor basis for a service delivery system. Hobbs went on to say that, "I see no way of getting an effective coordination of services or ensuring continuity of care as long as we continue to think about children in the classical categorical terms" (p. 497).

Diagnostic categorical grouping is supposed to provide for greater pupil homogeneity, in terms of behavioral characteristics, and each set of characteristics is supposed to require unique instructional methods. While these

assumptions have proven useful in differentiating instruction for some groups (e.g., the visually impaired; the deaf), their relevance for students whose learning problems are not related to clear sensory or physical impairments has not been demonstrated. This is because the learning characteristics of most etiological groups are very similar or overlap considerably (Balow & Balow, 1982; Hallahan & Kauffman, 1976; Reynolds & Birch, 1977). Trippe and Mathey (1982) observed that:

> Ninety percent of the children thought to be in need of special education are considered "handicapped" simply because they do not meet the expectations of the regular classroom for learning, communication, and behavior (p. 2)!

Differential diagnostic labels often are assigned to these pupils to expedite their removal from the regular classroom. The diagnostic label assigned may be determined more by which categorical program there is a vacancy in than by which program best suits the pupil's needs.

Etiological factors are useful in education only in the context of the decisions to be made. ". . . the causes of behavior are relevant to education only in relation to the differences they make in how teachers proceed with instruction and examples of this are hard to find" (Reynolds & Birch, 1977, p. 68).

Categorical Groupings Overlap

We already have alluded to the fact that there are many behavioral similarities among groups of handicapped pupils who have been differentially labeled. In large part, this is due to the lack of precision of current diagnostic instruments and procedures. Not only are differential diagnostic procedures inaccurate, they are also expensive, time-consuming, and, as we have suggested already, rather pointless for instructional purposes (Lilly, 1977; Trippe & Mathey, 1982). The only decision usually made as a result of diagnosis is who gets the pupil, not what teaching procedures are best

suited to his or her learning characteristics. As Lilly (1977) stated, all that would be lost by doing away with diagnosis are 1) much administrative effort which has little instructional payoff; and 2) the need to affix labels that follow students through school and, too often, beyond.

It may be argued that diagnosis is necessary for the purposes of identifying pupils needing special education and for procuring funds to support their programs. However, "if the issue is appropriateness of education for those children experiencing difficulties in school, what difference does it make whether the need is because of handicap or because of a host of other conditions or circumstances?" (Trippe & Mathey, 1982, p. 2). It makes no sense to deprive a student of needed educational services until he or she has been neglected long enough to qualify for a disability label. Lilly (1977) proposed that the basis for delivering special education services be a teacher referral, and that a functional (i.e., problem) analysis be the basis of remediation.

Categorical Labels Imply that the Problem is Within the Child

There is an extensive, if contradictory, literature regarding the deleterious effects of labeling on special education pupils (Ysseldyke & Algozzine, 1982). Labels are stigmatizing, damaging, and limiting to the person being labeled. These effects have been documented in terms of negative teacher attitudes (Alexander & Strain, 1978; Jones, Jamieson, Moulin, & Towner, 1981), lowered teacher expectations (Algozzine, Mercer, & Countermine, 1977; Gillung & Rucker, 1977), lower social status among peers (Iano, Ayres, Heller, McGettigan, & Walker, 1974; Sheare, 1974); and contributing to the beginning of a "deviant career" (Jones, 1977). While this research may be criticized on the basis of methodological problems, it is nevertheless true that most persons tend to view a labeled person differently than one who has not been labeled (Blackhurst & Berdine, 1981).

Labeling provides an all-too-convenient strategy for removing problem youngsters from the educational mainstream. Especially with regard to the construct "behaviorally disordered", referral to special education due to undesired behavior patterns generally ensures that a child will be labeled and placed in special education (Nelson, 1981). When a pupil has been labeled and removed from the regular classroom, his or her identification as an impaired or handicapped child hampers successful re-entry into the mainstream (MacMillan, Meyers, & Yoshida, 1978). As Trippe and Mathey observed, "It is clearly an instance of having to contend with problems that are consequences of prior solutions" (p. 4).

Labeling the pupil also overlooks the fact that the problem may exist in the environment instead (Lilly, 1977; Meyen, 1978). Particularly when the referral is occasioned by repeated disciplinary problems, the referring teacher, being emotionally involved and frequently defensive against the suggestion that he or she has acted wrongly, uses the convenient explanation that the student is emotionally disturbed or behaviorally disordered. And, as we have seen, the diagnostic process serves to confirm the teacher's subjective assessment.

Finally, parents frequently are resistant to the application of labels to their offspring, particularly if the label conveys the implication of parental responsibility. Grosenick and Huntze (1980) in their survey of states with data on unserved students with behavior problems, found that many pupils were not receiving services due to their parents' refusal to allow placement. Gross and Gottleib (1982) raised the question of how much easier it might be on parents if they were informed that their child has academic problems in need of remedial instruction rather than being told their child is mentally retarded, learning disabled, or behaviorally disordered.

MacMillan (1977) provided a cogent summary to the problem of labeling:

> The evidence for and against classifying and labeling is complex and inconclusive. Although it does not demonstrate convincingly that calling attention to people with intellectual (or learning or behavioral) deficiencies by giving them special treatment is always a bad thing, the controversy over labeling should make us all more sensitive to its potential hazards (p. 245).

Again, we must ask: Is it necessary to label children in order to provide them with needed services? Is it the best way to certify their eligibility for special education?

A frequent response to questions about the propriety of using pejorative labels is that other labels would arise to replace those which are discarded. Scriven (1976) correctly identified the basic problem as social prejudice; " . . . the general attitude of people--including the professionals--toward those whom they see as insane, inept, ugly, weird, dumb, queer, troublemakers, losers, sociopaths, sick, niggers, or honkies" (p. 64). As he pointed out, such attitudes will transcend any jargon we create. The solution to labeling, therefore, ultimately must involve general changes in the fabric of society--values, education, and social governance (Scriven, 1976). We do not pretend to have answers to the problem of how to accomplish social change on this scale; however, we cannot support the attitude that since no one knows the solution, we should allow the present categories to stand. At the root of societal change is education--if education stagnates, so does the culture.

Instructional Materials (and Methods) are not Category Specific

Regardless of a pupil's diagnostic label, the starting point for special education intervention is the IEP. At this level, knowing whether the student has been diagnosed as autistic, dyslexic, moderately retarded, or even deaf-blind is of little use. What is important is knowledge of the

student's specific functional strengths and weaknesses: Can he or she use and comprehend oral or written language? Follow directions? Engage in self-help skills? Does he or she reverse letters or words in writing? Engage in stereotypic behaviors? Solve basic or advanced mathematics problems? Interact appropriately with peers? Is he or she toilet trained? Ambulatory? Answers to these questions provide the basis for the instructional program, and the methods and materials used are chosen to improve the pupil's functioning on targeted skills. Contrary to the claims of some curriculum developers, there is no curriculum for autism or dyslexia. For example: self-injurious behavior must be decelerated whether it occurs in a "psychotic" or a "severely retarded" student; reading proficiency should be increased to the level that can reasonably be expected for a pupil, regardless of whether the student has been designated educable mentally retarded or learning disabled, etc.

Categorical Teacher Preparation is Not Functional

P.L. 88-164 established funds for higher education to train special education teachers in all disability areas, which helped to solidify boundaries between teacher preparation categories that already had been established in the service delivery system. In the early 1970's, the special education faculty of the University of Kentucky, seeing these boundaries as arbitrary and non-functional, designed a cross-categorical special education methods course (Blackhurst, Cross, Nelson, & Tawney, 1973; Nelson, Berdine, & Moyer, 1978). This course eliminated the redundancy of the previous categorical methods courses. Since then, Kentucky has joined other states in moving toward generic teacher preparation programs, at least for teachers of the mildly handicapped. Nevertheless, the majority of states still employ categorical special education teacher certification (Belch, 1979), and the diversity of programs and variety of certificate titles has made teacher certification

reciprocity among states extremely difficult (Mackey, 1980).

Likewise, distinctions between the training curricula of regular and special educators has impeded communication and interaction between these two groups (Hersh & Prehm, 1977; Reynolds & Birch, 1977). Davis and Wyatt (n.d.) raised the question of whether categorical "regular" and "special" education training programs have handicapped regular educators by failing to provide them with the information and skills needed to work with exceptional students, while at the same time, placing a great burden on special educators.

Categories are Perpetuated by Funding Practices

We already have discussed the effects of state and federal funding practices rather extensively. Suffice it to add here that such practices impose serious obstacles to those who would like to develop innovative educational programs. For example, the Madison Plan (Taylor & Soloway, 1973) is a cross-categorical special education delivery system in which pupils move from more to less restrictive settings as they demonstrate the skills needed to function in the next less restrictive setting. Where state funding formulas restrict a classroom unit to specific disability categories, there may not be an adequate number of pupils in the category to provide a basis for financing the continuum of settings required for such a program.

Such obstacles make it easier to operate special education programs in the same old way than to innovate. However, several trends are emerging which do provide some impetus for noncategorical approaches to special education. We will discuss these next.

Support for a Noncategorical Approach

As we mentioned earlier, efficacy studies of self-contained special education classes in the 1950's and 60's raised doubts concerning the propriety

of such practices for students placed in programs for the mildly and moderately retarded. However, it was not until Dunn (1968) published his famous criticism that these doubts became an outcry. Dunn's criticism was based on four documented points:

1. Self-contained classes for the mildly retarded were racially segregated.
2. The academic progress of students in self-contained classes for the mentally retarded was not better than that of retarded students in regular classes.
3. Labels accompanying special class placement were stigmatizing.
4. Regular education could provide adequate individualized instruction to accommodate slow learning pupils.

The field's response to Dunn's statement was relatively swift, thanks to the impetus provided by a number of class-action lawsuits in the early 1970's (Blackhurst & Berdine, 1981). The changes in special education programming which ensued included greater attention to due process and to students' and parents' rights, a greater concentration of special services in less restrictive settings, the emergence of noncategorical and competency-based teacher education programs, and experimentation with more direct and functional approaches to classifying and moving students through the continuum of special education services. In this section, we will highlight a few of these supporting factors, and provide more specific examples of noncategorical programs in the following section.

First, noncategorical teacher preparation has been around long enough to demonstrate that it is a viable alternative to categorical special education teacher training. Blackhurst (1981) cited a number of benefits of noncategorical teacher preparation, among them: 1) teachers are better prepared to teach students who exhibit a variety of educational characteristics; 2) school officials have greater flexibility in the use of special education staff; and

3) revisions in teacher training curricula have improved the range and depth of special education teachers' skills. We might add that generic training programs also tend to be more streamlined, because course redundancies across categorical areas are reduced.

Competency-based teacher education (CBTE) also has supported more generic approaches to special education teacher preparation, " . . . since when we emphasize necessary teaching skills, we find that the special education categories are a lot more alike than categorical training paradigms allowed them to be" (Lilly, 1979, p. 25). Competency in such areas as criterion-referenced assessment, continuous monitoring of student progress, systematic reinforcement, and direct instruction transcend categorical boundaries; in fact, these skill domains have been shown to enhance the learning of students throughout the range of academic ability.

Many professionals have indicated their conviction that special education services can, and should, be provided on the basis of functional rather than clinical diagnostic criteria. It would be redundant for us to repeat their statements here, and in the next section, we will show that noncategorical programs do work successfully. However, as we pointed out in our introduction, the notion that programming for the severely handicapped should be categorical is still relatively popular. Nevertheless, some educators who specialize in working with severely handicapped pupils tend not to see the utility of this idea. For example, Balow and Balow (1982) stated that separate educational programs for children labeled autistic are neither logical nor based on evidence. They stressed that the public and the child are better served when programs are based on functional needs than on narrow categorical labels.

Thus, there appears to be considerable support for a noncategorical approach to service delivery among teacher training institutions and even

among state teacher certification offices. Why then, have public school programs themselves been reluctant to respond? Gross and Gottleib (1982) summarized the difficulties faced by local education agencies in moving to noncategorical programs:

1. The potential resistance from and alienation of parent groups to whom the advances of special education are historically owed.

2. The fact that the majority of special education teachers are trained along categorical lines; many training institutions have a strong investment in categorical systems because of their previous research efforts and teaching experience.

3. The fact that most state laws are categorically defined today.

4. The assumption that because P.L. 94-142 is categorically organized, there is a legal requirement to model that system in the state and LEA (an assumption not based in fact).

5. The resistance from teacher organizations who want to protect their members' "rights" to a teaching position in a particular category . . .

6. The difficulty of explaining the change from categorical to generic programs in understandable terms to reference groups (teachers, boards, superintendents, parents).

7. The effective development of procedures to "crosswalk" a program from categorical to generic service without excessively disrupting the continuity of service to children.

8. The difficulty of isolating functional descriptions (eligibility criteria) for newly established generic groupings.

9. The retraining and redesign of an evaluation and placement staff who can produce behaviorally based assessments.

10. Getting the regular education system to operationally specify the minimum achievement requirements for each grade level, thereby providing special education with guidelines that can justify referrals to special education.

11. The development of instructional strategies for the mildly handicapped, which are an improvement over the differential-diagnosis/prescription-teaching model. This model, . . .

> traditionally seeks to assess underlying abilities and then prescribes instruction consistent with the ability strength and weaknesses (p. 509-510).

In addition, Huntze and Grosenick (1980) suggested that a noncategorical approach to teacher preparation might water down the ability of teachers to respond to the unique needs of behaviorally disordered pupils. They also observed that noncategorically trained teachers might be unable to handle the stresses involved in working with severe behavior problems.

We concur that these factors constitute strong deterrents. However, we cannot condone inactivity or stagnation as a means of dealing with concerns and resistances. Rather, we advocate an open, empirical approach in which components of noncategorical programming are field-tested and scientifically evaluated. The next section describes several examples of such experimentation.

Applications of Noncategorical Programming

P.L. 94-142 helped to establish the climate in which experimentation with educational programs that de-emphasized categorical approaches could occur. The thrust of this law is to decentralize special education, to develop in educators the skills needed to deal with exceptional learners in all educational settings, and to provide more generic, support-oriented special education personnel (Reynolds, 1979). Five years earlier Lilly (1970) argued for fundamental changes in special education, changes which " . . . should be supportive of broad experimentation with a variety of new approaches to children with problems in school" (p. 46). Central to the changes Lilly proposed was a revolutionary definition of special education and exceptional learners, one that shifted the emphasis from deficits inherent in the pupil to a focus on the need for special services:

> An exceptional school situation is one in which the interaction between a student and his teacher has been

limited to such an extent that external intervention is deemed necessary by the teacher to cope with the problem p. 48).

Unfortunately, this definition was not employed in P.L. 94-142. Categorical definitions of exceptional child populations were retained instead. Nevertheless, in the years preceding and subsequent to the passage of P.L. 94-142 in 1975, a number of alternate special education service delivery systems were created, based on the concept of a training-based model (Lilly, 1971), in which special education and other school staff with special skills work in support of teachers experiencing exceptional teaching situations.

Perhaps the best-known alternate delivery system is the Consulting Teacher program, which has been operating throughout the state of Vermont for nearly 15 years (McKenzie, Egner, Knight, Perelman, Schneider, & Garvin, 1970). In this model, specially trained consulting teachers provide services to pupils whose progress in academic or social areas is below expectations. Consulting teachers do not work directly with pupils, however. Their approach is to provide training and support to the students' teachers. The goal is to improve teachers' ability to individualize instruction and to solve problems independently. School districts apply for funds to employ a consulting teacher, and the position is funded without the need to identify, label, and count handicapped students (McKenzie, et al., 1970).

This model has been adapted for use in other states, although not on such a large scale. Schools in Illinois, Kentucky, and Arizona have incorporated teacher consultants into their delivery system for students with special needs (Idol-Maestas, 1981; McGlothlin, 1981; Nelson & Stevens, 1981). The original model is, of course, modified to suit local needs, but evaluations of consulting teaching have consistently found it to be effective in terms of serving relatively large numbers of students and teachers (Knight, 1978),

successfully remediating discrepancies between teacher expectations and pupil achievement (Idol-Maestas, Lloyd, & Lilly, 1981; Knight, Meyers, Paolucci-Whitcomb, Hasazi, & Nevin, 1981) and keeping students out of restrictive special education placements (Nelson & Stevens, 1981).

Reynolds and Birch (1977) described another model employed in the Bloomington, Minnesota schools. Special education teachers were sent into the first, second, and third grade classrooms to demonstrate an alternative to the reading program for pupils whose responses to the basal reading program had been inadequate. The advantages of this model were that no students were labeled or removed from the regular classroom, and regular class teachers were trained to use alternative approaches (i.e., to individualize instruction). An evaluation of this program revealed that the number of children scoring low in reading tests was sharply reduced, substantially fewer students were reading below grade level, the number of children enrolled in categorical special education programs for specialized tutoring was reduced by half, the cost of the experimental program was less than half that of the traditional program, and almost all administrators, teachers, and children wanted the program continued (Reynolds & Birch, 1977).

Chalfant, Pysh, and Moutrie (1979) described a model employing teacher assistance teams to support teachers and pupils in the mainstream. Teams provided a day-to-day peer problem-solving group for teachers within a given building. In one Illinois school district, it was found that of 203 pupils referred to the teams, 129 problems were handled without the need for referral to special education (i.e., special education referrals were reduced by 63.5%).

As we pointed out in the introduction, there have not been any direct comparisons of the efficacy of noncategorical and categorical special education

delivery systems. However, models as well-evaluated as these, which demonstrate effectiveness in terms of accelerated pupil growth and reduction in referrals for categorical special services, and which serve students without the use of pejorative labels, are convincing evidence that noncategorical special education programming can do what categorical approaches have done, and more.

Recommendations

Given the weight of this evidence, we do not see the logic of perpetuating the existing system of delivering educational services to pupils who require more than is available in the regular classroom by labeling and placing them in special education programs. Many of the authorities we have cited in this paper concur with us that it is the entire educational system that must be changed, not just special education. Some special education leaders have argued for a more diversified mainstream, supported by specialists (Reynolds & Birch, 1977), but which still retains that feature of identifying pupils as handicapped in order to fund special education programs. Others have emphasized that categorical funding is not a prerequisite (Lilly, 1977), and, in fact, the long-term success of systems like Vermont's Consulting Teacher program show that it can be done.

Our recommendation is for an educational system that is noncategorical throughout. In the words of Martin (1976):

> . . . we must develop a concept in which the learning needs of all children are seen as falling on a continuum of severity and requiring special intervention at certain times for specific purposes (p. 5).

We suggest that the basis for allocating these services, whether they be consultation with the target pupil's teacher or self-contained classroom placement, should be the learning characteristics and needs of the student.

Services should be arranged in terms of curriculum rather than categorical labels: students working on the acquisition of self-care skills might constitute one group; pupils developing proficiency in higher mathematics, another. Students would move from place to place, and from curriculum to curriculum, as their learning needs and educational progress dictate. This flexible grouping may not eliminate labels and stereotypes, but it might discourage such terms as "retarded class" or "funny farm".

Change of this sort has not come easily to the educational system, nor is it likely to in the future. However, we agree with Gilhool (1976) that our goal should be for special education to become general and general education special. "We are approaching the day when for each child, handicapped or not, the law will require that the schooling fit the child, his needs, his capacities, and his wishes, not that the child fit the school" (Gilhool, 1976, p. 13). This day cannot happen soon enough for us.

REFERENCES

Alexander, C., & Strain, P.S. A review of educators' attitudes toward handicapped children and the concept of mainstreaming. Psychology In The Schools, 1978, 15, 390-396.

Algozzine, B., Mercer, C.D., & Countermine, T. The effects of labels and behavior on teachers' expectations. Exceptional Children, 1977, 44, 131-132.

Balow, B., & Balow, E. Education of autistic children: Philosophy and program options. In C.R. Smith, J.P. Grimes, & J.J. Freilinger (Eds.), Autism: Programmatic considerations. Des Moines, Iowa: Department of Public Instruction, 1982.

Belch, P.J. Toward noncategorical teacher certification in special education: Myth or reality? Exceptional Children, 1979, 46, 129-131.

Blackhurst, A.E. Non-categorical teacher preparation: Problems and promises. Exceptional Children, 1981, 48, 197-205.

Blackhurst, A.E., Cross, D.P., Nelson, C.M., Tawney, J.W. Approximating noncategorical teacher education. Exceptional Children, 1973, 39, 284-288.

Blackhurst, A.E., & Berdine, W.H. Basic concepts of special education. In A.E. Blackhurst and W.H. Berdine (Eds.). An introduction to special education. Boston: Little, Brown, 1981.

Brito, T., & Reynolds, K. An epilogue. Teacher Education and Special Education, 1979, 2 (3), 10-11.

Chalfant, J.C., Pysh, M.V., Moultrie, R. Teacher assistance teams: A model for within-building problem solving. Learning Disability Quarterly, 1979, 2 (3), 85-96.

Cromwell, R.L. Ethics, umbrage, and the ABCD's. In M.C. Reynolds (Ed.), Mainstreaming: Origins and implications. Reston, Virginia: Council for Exceptional Children, 1975.

Davis, M.D., & Wyatt, K.E. Handicapped teachers or teachers of the handicapped? Exceptional children in regular classrooms. Minneapolis: Department of Audio Visual Extension, University of Minnesota, no date.

Dunn, L.M. Special education for the mildly retarded - Is much of it justifiable? Exceptional Children, 1968, 35, 5-22.

Gilhool, T.K. Changing public policies: Roots and forces. Minnesota Education, 1976, 2 (2), 8-14.

Gilling, T.B., & Rucker, C.H. Labels and teacher expectations. Exceptional Children, 1977, 43, 464-465.

Goldstein, H. Schools. In N. Hobbs (Ed.). Issues in the classification of children (Vol. 2). San Francisco: Jossey-Bass, 1975.

Grosenick, J.K., & Huntze, S.L. National needs analysis in behavior disorders: Severe behavior disorders. Columbia, Missouri: Department of Special Education, University of Missouri-Columbia, 1980.

Gross, J.C., & Gottlieb, J. The mildly handicapped: A service distinction of the future? In T.L. Miller and E.E. Davis (Eds.), The mildly handicapped student. New York: Grune and Stratton, 1982.

Hallahan, D.P., & Kauffman, J.M. Introduction to learning disabilities, Englewood Cliffs, N.J.: Prentice-Hall, 1976.

Heller, H.W., McCoy, K., & McEntire, B. Group summary. Teacher Education and Special Education, 1979, 2 (3), 8-10.

Hersh, R., & Prehm, J.H. Toward a new alliance. Teacher Education and Special Education, 1977, (1), 1-2.

Hobbs, N. Classification options: A conversation with Nicholas Hobbs on exceptional child education. Exceptional Children, 1978, 44, 494-497.

Huntze, S.L., & Grosenick, J.K. National needs analysis in behavior disorders: Human resource issues in behavior disorders. Columbia, Missouri: Department of Special Education, University of Missouri-Columbia, 1980.

Iano, P., Ayres, D., Heller, B., McGettigan, F., & Walker, S. Sociometric status of retarded children in an integrative program. Exceptional Children, 1974, 40, 267-271.

Idol-Maestas, G., Lloyd, S., & Lilly, S.M. Implementation of a noncategorical approach to direct service and teacher education. Exceptional Children, 1981, 48 (3), 123-219.

Idol-Maestas, L. A teacher training model: The resource/consulting teacher. Behavioral Disorders, 1981, 6, 108-121.

Jones, R.H. Self-fulfilling prophecies. Hillsdale, N.J.: Lawrence Elbaum Associates, 1977.

Jones, R.L., Jamieson, J., Moulin, L., & Towner, A.C. Attitudes and mainstreaming: Theoretical perspectives and a review of research. In P. Bates (Ed.), Mainstreaming: Our current knowledge base. Minneapolis: National Support Systems Project, University of Minnesota, 1981.

Knight, M.F., Meyers, H.W., Paolucci-Whitcomb, P., Hasazi, S.E., & Nevin, A. A four year evaluation of consulting teacher service. Behavioral Disorders, 1981, 6, 92-100.

Knight, M.F. Vermont's consulting teacher model for inservice training of educational personnel. In C.M. Nelson (Ed.), Field-based teacher training: Applications in special education. Minneapolis: Department of Psychoeducational Studies, University of Minnesota, 1978.

Lakin, K.C. Research-based knowledge and professional practices in special education for emotionally disturbed students. In C. R. Smith & B.J. Wilcots (Eds.), Iowa monograph: Current issues in behavior disorders -- 1982.

Lilly, S. A training based model for special education. Exceptional Children, 1971, 37, 745-749.

Lilly, S. A merger of categories: Are we finally ready? Journal of Learning Disabilities, 1977, 10, 115-121.

Lilly, S. Competency-based training. Teacher Education and Special Education, 1979, 2 (3), 20-25.

Lilly, S. Special education: A teapot in a tempest. Exceptional Children, 1970, 37, 43-49.

Mackey, C.C. Interstate certification and special education. Teacher Education and Special Education, 1980, 3 (2), 20-26.

MacMillan, D.L. Mental retardation in school and society. Boston: Little, Brown, 1977.

MacMillan, D.L., Meyers, C., & Yoshida, K. Regular class teachers perceptions of transition programs for EMR students and their impact on the students. Psychology In The Schools, 1978, 15, 99-103.

Martin, E. Integration of the handicapped child into regular schools. Minnesota Education, 1976, 2 (2), 5-7.

McGlothlin, J.E. The school consultation committee: An approach to implementing a teacher consultation model. Behavior Disorders, 1981, 6, 101-107.

McKenzie, H.S., Egner, A.N., Knight, M.F., Perelman, P.F., Schneider, B.M., & Garvin, J.S. Training consulting teachers to assist elementary teachers in the management and education of handicapped children. Exceptional Children, 1970, 37, 137-143.

Meyen, E.L. Exceptional Children and Youth: An introduction. Denver: Love Publishing Company, 1978.

Miller, T.L., & Davis, E.E. The mildly handicapped: A rationale. In T.L. Miller and E.E. Davis (Eds.), The mildly handicapped student. New York: Grune and Stratton, 1982.

National Association of State Directors of Special Education, Incorporated. A description of state funding procedures for special education in the public schools. Washington, D.C.: NASDSE, July, 1982.

Nelson, C.M. Behavior disorders. In A.E. Blackhurst and W.H. Berdine, (Eds.), An introduction to special education. Boston: Little, Brown, 1981.

Nelson, C.M., Berdine, W.H., & Moyer, J. The evolution of a noncategorical competency-based special education methods course. Journal of Special Education Technology, 1978, 2, 37-46.

Nelson, C.M., & Stevens, K. An accountable consultation model for mainstreaming behaviorally disordered children. Behavioral Disorders, 1981, 6, 82-91.

Reynolds, M.C. Categorical vs. noncategorical teacher training. Teacher Education and Special Education, 1979, 2 (3), 5-8.

Reynolds, M.C., & Birch, J.W. Teaching exceptional children in all America's schools. Reston, Virginia: Council for Exceptional Children, 1977.

Sheare, B. Social acceptance of EMR adolescents in integrated programs. American Journal of Mental Deficiency, 1974, 78, 678-682.

Scriven, M. Some issues in the logic and ethics of mainstreaming. Minnesota Education, 1976, 2 (2), 61-67.

Taylor, F.D., & Soloway, M.M. The Madison school plan: A functional model for merging the regular and special classrooms. In E.N. Deno (Ed.), Instructional alternatives for exceptional children, Minneapolis: Leadership Training Institute/Department of Special Education, University of Minneapolis, 1973.

Trippe, M., & Mathey, J. Mental, emotional, and learning disabilities: School-induced handicaps. In C.R. Smith & B.J. Wilcots (Eds.), Iowa monograph: Current issues in behavior disorders -- 1982. Des Moines, Iowa: Department of Public Instruction, 1982.

Ysseldyke, J.E., & Algozzine, B. Critical issues in special and remedial education. Boston: Houghton Mifflin, 1982.

NONCATEGORICAL EDUCATIONAL PROGRAMMING FOR BEHAVIOR DISORDERED CHILDREN: A DETERRENT TO FULL SERVICES FOR BEHAVIORALLY DISORDERED CHILDREN AND YOUTH

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The noncategorical educational programming strategy has its philosophical base in a variety of concerns. Most important among those are: (1) the concern that the label "behavior disordered" is unnecessarily stigmatizing and results in a range of negative effects that accrue to the child as a result of that label and (2) that children who are handicapped by their behavior do not display behaviors unique to that category, but, rather exhibit the same behaviors as other mildly handicapped children, i.e., those labeled learning disabled and educably mentally retarded (Blackhurst et al., 1977). These concerns led many professionals to adopt a noncategorical philosophy which advocated that mildly handicapped children did not need to be classified by handicap and that the mildly handicapped could be as effectively and less detrimentally served in noncategorical service delivery environments.

Support for the noncategorical stance also arose from another source. Historically, the behavior disordered population has been the most underserved of the major categories of handicapping conditions (Office of Education, 1979-81). That trend not only appears to be continuing but raises the spectre that it may remain so for years to come. Thus, other professionals viewed noncategorical programming as one strategy to assist in providing educational programming to greater numbers of behavior disordered children and youth.

However, despite the good intentions of most professionals who advocate this strategy, it is the position of these authors that noncategorical programming not only does not facilitate the provision of appropriate services to greater numbers of behavior disordered children and youth, it actually reduces quality services to those students, as a group, forces more restrictive

placements and threatens to undermine the progress made to date in services to that population.

It is necessary at the onset to clarify what population is being referred to by the term behavior disorders. For the purposes of this paper, behavior disorders refers to those children whose behavior interferes with their educational progress to such an extent that they require specialized educational programming as delineated in the implementing regulations for Public Law 94-142. In that sense, the term behavior disorders is synonymous with the term seriously emotionally disturbed that is used in Public Law 94-142. In this paper the terms are used interchangeably.

It is impossible to view noncategorical programming for behavior disordered children separately from two other issues: teacher training and state certification standards. These three aspects of services to children who are handicapped by their behavior are controlled by three different entities within our cultural framework. Institutions of higher education control teacher training; state education agencies determine certification standards; and local education agencies organize the actual service delivery. Thus, the question is not one merely of should local education agencies provide noncategorical programming to behavior disordered children and youth, because that programmatic decision is affected by the state education agency's perspective on certification and an institution's of higher education perspective on appropriate training. All three aspects of services to behavior disordered children affect and are affected by the others. Thus, noncategorical programming for the behaviorally disordered cannot be considered in isolation, but only as it affects and is affected by the other aspects of the total professional community that provides service to those children and youth.

Discussed here are six major areas of concern in relation to this

broadened categorical/noncategorical programming issue: Political/Governmental Realities, Program Quality, The Labeling Concern, Service Delivery and Consumer Factors, Personal/Social Concerns, and Categories and Communication. Within each, we will discuss what we view as the advantages of categorical positions and the disadvantages of noncategorical positions. While many of the concerns expressed about categorical programming by those who advocate noncategorical programming are well taken (no strategy, categorical programming included, is without weakness), we feel that the advantages of categorical programming:

1. far outweigh any disadvantages; and
2. are clearly more advantageous to behavior disordered children and youth than are noncategorical programming efforts.

Thus, we present to the reader the case for categorical programming and the case against noncategorical programming for behavior disordered children and youth.

Political/Governmental Realities

Categorical political visibility is a necessity. One of the realities of life in our country is that political visibility is required in order to engender the support of the governmental/regulatory establishment. Political visibility occurs when persons organize around an identifiable segment of our population and press for changes that benefit that population. Support for the population in question may take the form of laws, regulations, and the distribution of financial resources that benefit that population. The label, behavior disorders, is the key to political visibility for the behavior disordered population. Three examples reinforce this point:

1. At a recent workshop, a member of CEC's governmental relations section made several strong points concerning the need for categories in order to communicate to non-professional populations and to target limited resources. Categories, he said, assist persons in identifying with a group. Without categories we lose our political base and our constituency. Without categories we cannot identify with a group and,

therefore, we do not support them. Issues diffuse when identity is lost. In fact, the loss of categories "would be our political death." He was referring in these remarks to visibility for special education at a national level. We feel that those same remarks hold true for behavior disorders at a local level.

2. As proof of that perspective, consider the commendable work of organizations like ARC (Association for Retarded Citizens) and ACLD (Association for Children with Learning Disabilities). These organizations have been very active in issues from local identification procedures to formation of legislation. However, even when working in states or localities where noncategorical services are provided, their efforts have not been to help that group of which learning disabled or mentally retarded children are a part. Their efforts and the outcomes have been to benefit a categorical population. That is in no way to chastise those efforts. These groups simply know what these authors maintain--that categorical identity is a political necessity in our society.

3. Consider also the often repeated lament of professionals in the area of behavior disorders concerning the lack of a strong advocacy organization for these children and youth. The unspoken belief of that concern is that such an organization could generate the support necessary to make changes to benefit behavior disordered children and youth the way other categorical organizational efforts have benefited the blind, learning disabled, mentally retarded, physically disabled, etc.

This is not to suggest that political visibility is meaningful for its own sake. The point of that political visibility is, of course, to effect governmental/regulatory changes that benefit the population in question. Notable among these are funding issues and certification requirements.

Categorical funding channels more dollars to behavior disordered students. Funding is currently categorical in the majority of states, generally by mandate, sometimes as a result of convention. Once funds are released from a categorical designation, it becomes difficult, if not impossible, to demonstrate that the dollars are actually benefiting the intended line item, in this case, behavior disordered students. Those funds may be benefiting a service of which these students may be a part, but without the categorical designation of child and program, it is not possible to be assured that

students handicapped by their behavior are actually recipients of the services those dollars generate. For a variety of reasons to be discussed later, we question the often made assumption that noncategorical programming is actually reaching more behavior disordered students. In fact, it will be suggested that noncategorical programs actually exclude students who are handicapped by their behavior. Thus, we feel that noncategorical programming actually focuses fewer service dollars on behavior disordered students.

Noncategorical certification creates flexibility for teachers at the expense of services to behavior disordered children and youth. A second governmental/regulatory issue that surfaces is that of certification. Until 10 years ago, virtually every state certified their "special" teachers by handicapping condition. The advent of a lot of professional attention on competency based teacher education and the devastating teacher shortages in special education (Schofer and Duncan, 1982; Akin, 1981) led some professionals to expound the view that noncategorical certification of special teachers, especially for the educably mentally retarded, learning disabled, and behavior disordered populations, would provide larger numbers of qualified teachers for all those populations. Again, for reasons to be discussed later, we feel that this is inaccurate. However, in response to this view, some states moved to noncategorical teacher certification. By 1978, approximately one-half of the states either had noncategorical certification or were considering it. This led many to assume that noncategorical certification was the "wave of the future." That has not proven to be the case. Several of the states that indicated that they were considering it never pursued the option. Further, there is increasing dissatisfaction with the system in some states that were early adopters of the plan. In Pennsylvania, an early advocate of noncategorical certification and a vocal supporter of it, there is increasing dissatisfaction with it among long-time observers of the field (Sindelar, 1983).

The concerns expressed include:

1. Although certification is noncategorical in Pennsylvania most local education agencies' program offerings are still categorical. Thus, position vacancies are announced by handicapping condition. The largest number of vacancies (perhaps as many as 8 or 9 out of 10) are for behavior disordered programs, especially adolescent behavior disordered. This would clearly indicate that the increased number of teachers made available, in theory, to behavior disordered students by virtue of noncategorical certification are not actually serving the students handicapped by their behavior. Many teachers apparently perceive these students as more difficult to teach and/or needing more specialized skills than they possess. These teachers are apparently using their noncategorical certification to serve educably mentally retarded and learning disabled students, to the detriment of behavior disordered students.

2. Teachers who do take positions in programs for the behaviorally disordered because their certification permits it are often only waiting for a vacancy in another type of program.

3. Teacher trainers are increasingly concerned that they cannot possibly prepare teachers to do everything that their noncategorical certificate entitles them to do.

Noncategorical programming rests on a premise that diffuses and lessens support for the behavior disordered population. It reduces the visibility, concerted action for and dollars to these children and youth. It also diffuses a strong, professional commitment to the identified population as expressed in categorically certified teachers for this population. Thus, it is the authors' position that quality programming for behavior disordered students arises from categorical programming which arises from a categorical visibility, funding base, regulation and teacher certification.

Hobbs (1978) states this assumption which we support: "Categories and labels may open up opportunities for exceptional children, facilitate the passage of legislation in their interest, supply rallying points for volunteer organizations and provide a rational structure for the administration of governmental programs" (p. 13). We need categorical visibility in order to focus attention and resources on the needs of behavior disordered children

and youth. That attention and those resources will have the most impact when translated into categorical programming.

Program Quality: Teacher Training Considerations

The single most important factor in program quality for behavior disordered students is the quality of the service provider. One strong measure of that quality is the depth and breadth of preservice training for teachers of that population. Other measures of that quality are represented by the "match" (or lack of it) of teacher skills with student need.

Categorical training programs do the best job of training well-qualified teachers for behavior disordered children and youth. Training programs of finite length can focus all of their professional preparation hours on skills and issues relative to behavior disordered students, or they can utilize those same hours to focus on skills and issues relative to children with impaired intellectual functioning and specific learning disabilities as well as children who are handicapped as a result of behavior. The broader the scope of concerns considered, the less time there is to commit to the range of skills and issues specific to the behavior disordered population. While no one would deny the overlap of skills necessary for all three populations, there is also a large body of category-specific literature, research and skills that should be possessed by fully qualified teachers of behavior disordered children. Behavior disorders specific training programs, which most are, are hard pressed enough at present to prepare behavior disorders specific personnel with the range of expertise they need. Additional information at the expense of material that broadens a professional's experience with this population will result in reducing service provider quality for these students. As one respondent to a questionnaire on categorical/noncategorical teacher training stated: "All things to all people is a myth. Excellence in an area may

be effective" (Huntze, 1980). From the same source, another teacher trainer states:

> I think most of the faculty (all of whom have had extensive experience teaching specific handicapping conditions) do not subscribe to the idea (of) one methods course for all high-incidence conditions. Most of us "believe that methods must be tied to use of materials, to the nature and needs of the learners and ultimately to the 'what' or content of the curriculum. If one really knows handicapped youngsters and the educational process, it is apparent that an educable retarded kid may need different considerations, materials and program content than does a learning disabled pupil, etc. This is not to say that there isn't overlap and perhaps generic principles related to teaching and learning that apply to all pupils, handicapped and non-handicapped. This knowledge, I believe, should be imparted in a general course given all perspective teachers . . . We feel that we owe our students and the handicapped kids more than a conglomerate single methods course (p. 74).

Categorically trained teachers are not prepared to meet the needs of all students placed in noncategorical service delivery options. In addition to the major concern discussed above, there are some practical issues. The majority of special education training programs are categorical. Thus, noncategorical service delivery options for the educably mentally retarded, behavior disordered and learning disabled children must often utilize teachers trained in categorical programs who then find themselves less than fully prepared for a large percentage of their students. This does a disservice to many children and, if, as is usually the case, that teacher's certification is not in behavior disorders, then children handicapped by their behavior are most often the losers.

Trainer expertise is still primarily categorical. Another reality of the issue is that teacher trainers in special education are probably categorically trained and oriented themselves (Huntze, 1980). So, even in a situation in which the training program is re-written to become noncategorical, students find that "you are what your professor was," that is, professors, by virtue of their own experiences and training will likely pass along categorically

slanted information in a noncategorical guise either by virtue of the information selected to teach or the relative emphasis given to certain topics.

Categorical training is not incompatible with competency based teacher education. A final consideration surrounds the competency based teacher education (CBTE) perspective. In the perception of many, the competency based teacher education approach provided the justification for noncategorical training (Blackhurst, et al., 1977). The overlap of competencies from different categories was presumed to indicate the generic nature of teaching skills necessary for handicapped children. There are two major concerns about this assumption. The selection of any given teaching technique is dependent upon several factors including the cause of the situation at hand and the likely outcome of the application of that technique. Thus, while any given technique or competency may be requisite for all teachers, the application of it is often based upon factors that can be population specific. That is to say that the cause of a child's behavior and the likelihood of a certain outcome to a given technique may be very different between a behavior disordered child and a learning disabled or educably mentally retarded child.

In addition to competencies that appear the same across categories, there are still a large number of category-specific competencies that tend to be eliminated from noncategorical training programs. Thus, the skills most needed by teachers who deal with behavior disordered children and youth (or learning disabled or educably mentally retarded) tend to be neglected in noncategorical programs.

The Labeling Concern

As previously indicated, one of the major issues responsible for the development of the noncategorical philosophy is the concern of professionals that negative effects accrue to handicapped students as a function of the label

they are assigned, that is, being classified as behaviorally disordered. Wood (1979) discusses the meaning of the term "labeling" and indicates, that for some, the term labeling has come to mean an item that "conveys a feeling of negative valuing of what is labeled." For others, labeling connotes "defining or classifying" (p. 3). We suspect that it is generally the former perspective that is held by those who support the noncategorical philosophy and the latter by those who support a categorical one. Wood goes on to point out that a label probably has a "negative, hostile aspect" as well as a "positive well-intentioned one" (p. 4). If that is the case, which these authors agree that it is, then the task before educational programmers is to determine whether or not the positive aspect of a label outweighs its negative one. In general, it is our belief that the good which derives from classifying a child in order to allow for appropriate specialized services justifies the labels used.

There are two additional points for consideration. It has been argued by those who oppose categorical programming that placing assessment emphasis on classification and differential assignment of pupils to specific programs perpetuates the unhealthy labeling of children. However, while discrimination and misunderstanding of exceptional children and adolescents continue, there is no evidence that these processes are any more of a problem of categorical programs than noncategorical ones. Further, data are not available to support the contention that the labeling process (whether it be for pupils classified as behaviorally disordered, mentally retarded or learning disabled) is the basis for the low social status of most mildly handicapped pupils. In fact, it can be cogently argued that the label behavior disordered merely names a set of behaviors that have already served to create distance, fear, dislike, etc. between the behaviorally handicapped child and his or her peers. As

observed by MacMillan, Jones, and Aloia (1974), "while many accept as fact that labeling children mentally retarded has detrimental effects, conclusive empirical evidence of these effects was not found" (p. 257). While this finding should in no way be construed as a justification for capricious and thoughtless labeling, neither should it be the basis for condemning the accurate classification of students when this process is professionally undertaken for the purpose of achieving acceptable educational services.

Service Delivery and Consumer Factors

In the final analysis, the issue of whether or not exceptional children and youth should be classified for educational purposes on the basis of their handicapping condition must ultimately be made through an examination of the impact on the pupils and families who will be served. Regardless of other accurate or valid support, categorical programming must be the best educational alternative for children handicapped by their behavior if it is to be supported. We consider that the preponderance of information and data supports the categorical position. Following are several discrete rationale for this affirmation as it relates to those issues that directly affect educational performance.

Categorical programs increase the availability of services to behaviorally disordered children and youth. Whether one ascribes to the conservative U.S. Department of Education prevalence figure of two percent or a more realistic estimate (i.e., 6-10%) is largely academic since estimates reveal that only about .5% of the school age population is being served as seriously emotionally disturbed (Kauffman, 1980). Hence, in spite of the federal requirement that all seriously emotionally disturbed children and youth be provided appropriate services it is readily apparent that program options are far short of current needs. While a number of creative and unique models and alternatives have

been employed to increase the availability of services to behaviorally disordered and emotionally disturbed children and adolescents, only the development of programs specifically designed for the disturbed seems to have the desired impact. While perhaps simplistic it is nonetheless true that, if a community or school district truly wishes to serve the needs of its behaviorally impaired pupils, it should implement a program specifically for these students as opposed to employing a more circuitous strategy.

While it might be argued that a noncategorical strategy would facilitate the servicing of greater numbers of behaviorally disordered pupils--based on the notion that such a model would allow for more readily available certified personnel--it rarely accomplishes that goal. First, noncategorical programs for the mildly handicapped, in spite of their professed willingness to educate all appropriate children without regard to their presenting problems and characteristics, have been conspicuous for forestalling the entrance of pupils whose primary deficits are emotional or behavioral. Such programs are often geared to provide services to mildly retarded and learning problem children and adolescents; students who present primarily challenging behaviors, social deficits and emotional problems are frequently the last pupils to be admitted and the first to be dismissed. Further, noncategorical programs have been known to perceive the needs of the emotionally disturbed as being outside the parameters of their program's design. One need only consider the frequency with which program personnel have made comments such as "this is a noncategorical program for mildly retarded and learning disabled; we are not really set up to handle the emotionally disturbed" to appreciate the gravity of this situation. As a result of the lack of availability of these programs to children and youth with emotional and behavioral problems, communities and school districts have no alternatives but to maintain these pupils without

services or to seek out programs in more restrictive settings such as state hospitals or residential facilities.

A second reason that noncategorical programs have failed to significantly increase the availability of services to the behaviorally impaired and emotionally disturbed is that the development of such models is often incompatible with an accurate prevalence count. Frequently, noncategorical programs are developed around the assumption that a community or district will have a population of mildly retarded and learning problem students commensurate with state and national prevalence estimates; however, it is often assumed that there will only be a "few" pupils in need of a program because of behavioral or emotional difficulties. As a result, communities and districts may overtly or covertly discourage the identification of the actual number of pupils requiring services because of a serious emotional or behavioral problem.

In spite of the fact that specialized programs for the emotionally disturbed may be more difficult to initially begin, they are the most efficient method for delivering appropriate services to the greatest number of pupils. Given the minimal number of pupils being provided suitable services, there must be attempts to promote those models which facilitate the delivery of services to the greatest number of children and adolescents. In spite of their weaknesses, categorical programs for the emotionally disturbed offer services to the greatest number of children and adolescents.

A number of procedures and strategies are categorically specific. One of the most basic and consequential reasons for the educational grouping of behaviorally disordered children and youth is that a number of procedures and methods associated with the successful instruction of these pupils are population specific. As observed by Blackhurst, Cross, Nelson, and Tawney

(1973) "certain content and instructional procedures are specific to some disability areas, especially where severe degrees of handicap exist" (p. 284). Hence, while individualization must characterize the services rendered behaviorally and emotionally impaired students, it must be recognized that they will be most responsive to certain strategies and materials not necessarily in use with other diagnostic groups. In particular, behaviorally disordered pupils can be expected to require socialization and behavior management programs frequently beyond the scope of those used with many other mildly handicapped children and adolescents (Dembinski, Schultz and Walton, 1982). As observed by Shea (1978) "The teaching of children and youth with behavior disorders is not restricted to instruction and/or training in preacademic and academic skills, as important as they may be from a societal perspective" (p. 131). Further, while there may be much similarity in the curricula and materials used with mildly handicapped students, the procedures for employing these resources with behaviorally disordered and emotionally disturbed pupils is frequently different (Fagen & Long, 1979). As a result, these pupils must be homogeneously grouped to allow those strategies most appropriate for their needs an opportunity for maximum impact.

While arguments to the contrary abound, the simple fact is that there are significant differences between behaviorally disordered and other varieties of handicapped pupils. Gajar (1979) assessed the cognitive, affective, and demographic characteristics of children previously identified as educably mentally retarded, learning disabled, and emotionally disturbed. While some similarities were observed there were a greater number of educationally significant differences, many of which are associated with differential educational methodology and strategies. It is within the framework of these differences that the categorical-noncategorical issue must be analyzed.

Because different diagnostic groups require different procedures and curricula, it is apparent that educators who are required to plan and program for a variety of diagnostic groups will demonstrate less efficiency and expertise than those who are allowed to concentrate their efforts on a more homogeneous group of pupils. One need only consider the value of specialization in other professional groups and endeavors to appreciate the significance of this position. For instance, what parent confronted with the need to seek medical attention for their heart-ailing child would choose a general practitioner over a pediatric cardiologist; or what conscientious adult faced with a tax audit would seek counsel from a general accountant over a tax specialist. In the same manner educators of handicapped children--including the behaviorally disordered--can be expected to be most efficient when allowed to concentrate and develop procedural and curricular expertise with a similar group of pupils as opposed to serving a heterogeneous population with widely varying needs. While it is necessary that all teachers be knowledgeable and competent in those basic and general procedures associated with the successful education of all pupils it is also apparent that optimal success will be a function of allowing these same professionals an opportunity to refine their skills and establish their expertise with as homogeneous a group of pupils as possible. While it is not disputed that teachers of mildly handicapped pupils can physically accommodate a variety of diagnostic groups in a program, it is suggested that the quality of services rendered under such conditions can be expected to be less than optimal.

Categorical programs are associated with enhanced quality and precision of screening and assessment. In spite of their controversial nature, accurate and efficient identification and assessment procedures are agreed to be a fundamental element of any effective education program for handicapped pupils

(Hobbs, 1975). For both categorical and noncategorical programs, there must exist acceptable means for initially identifying children and youth requiring evaluations and comprehensive assessment methods for classifying and determining suitable intervention programs.

Three primary goals serve to guide identification and assessment efforts with mildly handicapped pupils: (1) accurately identify and classify particular problem sets and patterns; (2) scrupulously assign students to programs most suited to their needs; and (3) collect information and data which can be used to construct instructional and intervention programs. Each of these primary evaluation goals is facilitated by adherence to a categorical model.

Classifying and categorizing particular school related patterns and problems is not an extraneous process; rather, such a procedure is a basic element of any scientific endeavor and thus a necessary pursuit for special educators. In accordance with this scientific notion (not to mention legislative enactments on assessment and evaluation) mildly handicapped children and youth should be differentially identified and classified according to some specified standard. These standards, in spite of their limitations, offer guidelines for accurate and comprehensive evaluations which ultimately lead to thoughtful disposition on the appropriateness of individual pupils for programs and educational strategies. Without these standards, identification and assessment often become less than acceptable. Furthermore, rigorous efforts to accurately classify and evaluate are almost always associated with categorical programs. In instances where mildly handicapped pupils are served without regard to their classification or standardized patterns of behavior, limited motivation exists for following traditionally acceptable assessment guidelines, the most appropriate and proven mechanism for achieving accurate evaluations. As a result, diagnosticians and educators

associated with noncategorical programs are more inclined to adopt the position that comprehensive evaluations and accurate classification are relatively unimportant since pupils entering these classes will be served independent of their classified deficit patterns. While on the surface this approach appears to have the advantage of allowing educators to divorce themselves from classification issues and unnecessarily complex assessment procedures and to devote additional attention to the more important task of effective educational planning for individual pupils, we believe it is most commonly associated with less than adequate overall evaluations.

Categorical program evaluations also facilitate the accurate assignment of pupils to programs most compatible with their educational needs. When different program options exist for mildly handicapped students (including the regular classroom and related service delivery models), assessment strategies and procedures are more often designed to determine the most acceptable program and services required by individual children. In contrast, when only a single placement option is available, efforts to match needs with programs are often perceived as unnecessary or pointless. Further, emphasis on accurately determining the most suitable program option for a pupil, as opposed to simply making a judgment regarding whether or not a pupil is appropriate for a single program, is more compatible with the diagnostic guidelines of the Education for All Handicapped Children Act of 1975.

Above and beyond all else, assessment procedures should be designed to generate information and data useful in planning handicapped students' programs. Evaluations undertaken by diagnosticians associated with categorical programs more often produce information which can be used by classroom teachers to understand pupils' specific problems and which can be translated into functional curricula and procedures shown to be effective with similar

types of pupils. As suggested previously, the higher quality and precision of categorical programs provides a basis for better pupil programming.

Categorical programs are less subject to abuse. In their introductory textbook, Hallahan and Kauffman (1982) raise the issue of why--given the strong theoretical case that can be made for noncategorical programs (which, by the way, we willingly acknowledge)--have states been so resistant to adopting this model. The answer to this query, at least in part, is that these programs have both the potential for and a history of misuse. As a result, many otherwise receptive administrators and program managers have withheld adopting these models.

It might be assumed that educators (and special educators in particular) need to be more trusting and to faithfully accept that our colleagues and the boards of education and other administrative bodies for which they work are conscientious and ethical individuals and that regardless of the contingencies that are in operation that they will willingly invest the necessary resources to serve the needs of mildly handicapped children and adolescents in their respective domains. Yet, in spite of the alluring nature of this posture, only the most naive would be willing to accept that position. Unfortunate as it is, the history of our profession reveals that only when encouraged by legislative enactments, legal rulings and other structured mechanisms have we been able to provide suitable services for exceptional pupils. Vogel (1982) for example, noted that many compensatory and "special" programs will be maintained only as long as state and federal requirements remain in effect. Hence, one need not be paranoid or arrogant to question the use of models and systems where a history of abuse has so frequently occurred.

One area of concern relative to noncategorical programs is that they frequently have extremely obscure entrance and exit criteria. Since these

programs ostensibly operate to serve all mildly handicapped pupils without regard to diagnostic classification, they often admit students who would not qualify for admission to categorical programs. Further, since attempts are made to group children according to ability level, pupils with widely varying ages are more often served in noncategorical than categorical programs. Additionally, noncategorical programs for children with mild intellectual, learning, and emotional difficulties may be insidiously expanded to include more severely handicapped pupils and children and youth with hearing impairments, visual handicaps, neurological deficits, and musculoskeletal conditions. Finally, these programs have been notorious for withholding services to emotionally and behaviorally handicapped pupils. As observed in a prior discussion, this common practice both impedes the development of other public school services for the emotionally disturbed and limits the least restrictive options available to these pupils.

Another common misuse of the noncategorical model is associated with the dubious premise made in these programs that all mildly handicapped pupils are equally responsive to the same teaching strategies, intervention procedures and educational materials and thus require less individual planning and attention than would be found in categorical programs. Further, this assumption has tended to retard the development and refinement of particular approaches having specific value with select diagnostic groups. As any seasoned teacher of behaviorally disordered pupils can attest, these youngsters do respond to the "right" techniques, but these are often unique to the population.

Misuse in noncategorical programs has also occurred when ill-equipped teachers are unable to contend with the range, intensity and variety of mildly handicapped pupils' behaviors. In particular, behaviorally disordered pupils

seem to present a unique and often overwhelming challenge to teachers lacking specific training and appropriate experiences. This dilemma has, unfortunately, resulted in high teacher burnout or the elimination of behaviorally disorderd children from programs. Rarely has it had the effect of allowing for the development of those teaching skills necessary for operating a quality program.

Finally, since noncategorical programs serve more diverse populations and generally have more ambiguous entrance and exit criteria, they tend to be more difficult to evaluate. The resulting problems associated with establishing efficacy, justifying resources, and monitoring progress make this model both difficult to defend and vulnerable as the basis for planning and modeling future programs.

Personal/Social

Noncategorical programs may increase attrition. The high rate of attrition in the area of behavior disorders, specifically the portion of that attrition represented by "burnout," is of great concern to professionals in behavior disorders as well as public school systems. Some preliminary data have begun to express the concern that there is more burnout among teachers in noncategorical service delivery options, i.e., noncategorically trained persons or categorically trained persons in noncategorical program environments, than among professionals in categorical service options (Siantz, 1980). The authors feel that this is partially the result of teachers who daily face a group of children, some of whom they do not have the training and skills to deal with. That type of contact affords little reinforcement or sense of progress. Teachers who do not feel successful do not stay. Teachers who have chosen to pursue a categorical degree and are trained for the range of inappropriate behaviors they will face are more likely to be successful and will display more commitment to the behavior disordered child.

This is one of the reasons that we feel that noncategorical programming for behavior disordered students actually reduces the number of professionals available to those students. Even though a categorically trained teacher of the behaviorally disordered may be placed in a noncategorical service delivery environment, that teacher faces educably mentally retarded and learning disabled students on a daily basis. That teacher is only partially trained to deal with those students. The sense of frustration and failure may drive from the field the teacher trained specifically in behavior disorders and, thus, reduce the already alarmingly low numbers of specific personnel for that population.

Pride and professional identity. Related to the above issue is one concerning morale and professional identity. A sense of success and the support of other professionals who deal with the same problems is instrumental in creating professionals who take pride in creative service delivery and who desire to continue their professional growth as well as their service delivery position. Being identified with the field of behavior disorders creates just such an atmosphere and support system and by strengthening the professional, thereby strengthens the educational programming for children and youth handicapped by their behavior.

Noncategorically trained teachers migrate toward positions that do not serve behavior disordered children and youth. Another reason that we feel noncategorical service delivery reduces the number of well-trained professionals available to behavior disordered students is that noncategorically trained teachers appear to migrate toward positions that may serve primarily the "slow learner" or learning problem child. In a climate which has teacher shortages anyway, service delivery options with students who have more behavior problems and may be considered more difficult go unfilled to be eventually

filled by a temporarily certified person or by one who did not really want that class. This can only serve to reduce the quantity and quality of professionals available to behavior disordered children and youth.

For one reason or another, many observers of services to behavior disordered children feel that noncategorical services have actually reduced the core of well-trained persons dedicated to that population.

Categories Are Basic to Communication and the Scientific Advancement of the Discipline

Classification, a fundamental element of any science or scientific endeavor, offers professionals a basic organizational structure for systematically exploring the nature and characteristics of various subjects. With regard to the present issue, we perceive the separation and classification of the highly heterogeneous mildly handicapped population to be integral to the scientific advancement of our profession. To take the position that a known heterogeneous population has no functional differences simply because the distinguishing factors are somewhat subtle and not immediately translatable to differential curricula and procedures is contrary to the advancement of the discipline. Further, this attitude is an impediment to the communication so necessary to any complex and multifaceted field. We acknowledge that there are weaknesses and problems associated with the present systems of classifying and discriminating among mildly handicapped school-age children and adolescents; or more in accordance with scientific thought that our system of classification is in the process of refinement. Truly, advancements are being made in categorical classification systems and this process will continue if appropriately nurtured.

Quite simply, the underlying premise of the noncategorical position, (i.e., that it is impossible or unimportant to distinguish between mildly

handicapped pupils on the basis of psychological, educational, and social characteristics and its correlate that a single common teaching strategy and curriculum will equally serve the needs of all these pupils) is not only faulty but an impediment to the scientific advancement of the discipline and the communication process upon which progress is based. Ultimately, the assumptions associated with the noncategorical strategy will retard advancements in identifying the response nuances of different types of mildly handicapped pupils, the respective curricula to which they will be most responsive, and the communication systems necessary for the scientific advancement of the discipline.

Summary

It is the consensus of these authors that, while categorical service delivery certainly has its weaknesses and noncategorical programming has much to recommend it in theory, in practice it is the categorical programming that best serves behavior disordered children and youth. It is the practical application as represented by services to behavior disordered students that is the criteria by which we maintain that categorical services have more advantages than disadvantages and that categorical programming is clearly more advantageous to behavior disordered children and youth than are noncategorical programming efforts. This belief is based upon the following rationale:

1. The political/governmental realities of our society indicate that behavior disordered children and youth are best served when they retain visibility as a categorical entity.

2. Quality teacher training is most often synonymous with categorical training; and teacher quality is the most important factor in providing appropriate educational services to behavior disordered children and youth.

3. As put into practice by service providers, categorical programs: increase availability of services to behavior disordered students; reduce inappropriately restrictive placements; are less subject to abuse; and best represent the instructional and identification methods available to us.

4. A cadre of well-trained teachers dedicated to the behavior disordered population arises from categorical teacher training and categorical service delivery environments.

5. The categorical position enhances communication among professionals and offers our best hope for the scientific, systematic exploration of behavior disorders, its causes and treatments.

It is our position that, weaknesses not withstanding, the categorical perspective in the field of behavior disorders is our best choice and best hope for progress in appropriate services to children and youth who are behaviorally disordered.

REFERENCES

Akin, J.N. Teacher supply and demand: A recent survey. Madison, Wisconsin: Association for School, College and University Staffing, 1981.

Blackhurst, A.E., Cross, D.P., Nelson, C.M., & Tawney, J.W. Approximating noncategorical teacher education. Exceptional Children, 1973, 39 (4), 284-288.

Blackhurst, A.E., McLoughlin, J.A., & Price, L.M. Issues in the development of programs to prepare teachers of children with learning and behavior disorders. Behavioral Disorders, 1977, 2, 157-168.

Dembinski, R.J., Schultz, E.W. & Walton, W.T. Curriculum intervention with the emotionally disturbed student: A psychoeducational perspective. In R.L. McDowell, G.W. Adamson & F.H. Wood (Eds.). Teaching emotionally disturbed children. Boston: Little, Brown, 1982.

Fagen, S. & Long, N. A psychoeducational curriculum approach to teaching self-control. Behavior Disorders, 1979, 4, 68-82.

Gajar, A. Educable mentally retarded, learning disabled, emotionally disturbed: Similarities and differences. Exceptional Children, 1979, 45, 470-472.

Hallahan, D.P. & Kauffman, J.M. Exceptional children: Introduction to special education. Englewood Cliffs, New Jersey: Prentice-Hall, 1982.

Hobbs, N. The futures of children. San Francisco: Jossey-Bass, 1975.

Huntze, S. Categorical vs. non-categorical teacher training. Doctoral Dissertation, University of Missouri, Columbia, 1980.

Huntze, S. & Grosenick, J. National needs analysis in behavior disorders: Human resource issues in behavior disorders. Columbia, Missouri: Department of Special Education, University of Missouri-Columbia, 1980.

Kauffman, J.M. Where special education for disturbed children is going: A personal view. Exceptional Children, 1980, 48, 522-527.

MacMillan, D.L., Jones, R.L. & Aloia, G.F. The mentally retarded label: A theoretical analysis and review of research. American Journal of Mental Deficiency, 1974, 79, 241-261.

Progress toward a free appropriate public education. Washington, D.C.: U.S. Office of Health, Education and Welfare, HEW Publication No. (OE) 79-05003.

Schofer, R. & Duncan, J. A national survey of comprehensive systems of personnel development: A fourth status study. Columbia, Missouri: Department of Special Education, University of Missouri, 1982.

Siantz, J.E. A pilot study of the attrition rate of special education teachers. Unpublished masters thesis, University of Kansas, 1980.

Sindelar, P. Telephone interview: Discussion on Pennsylvania's non-categorical teacher certification. University Park, Pennsylvania, 1983.

Shea, T.M. Teaching children and youth with behavior disorders. St. Louis: Mosby, 1978.

Vogel, M. Education grant consolidation: Its potential and distributive effects. Harvard Educational Review, 1982, 52, 169-185.

Weintraub, F. Washington, D.C. Poop and Scoop. Denver: Presentation at the 1982 Fall Workshop of the Inservice Project on Leadership Training in the Area of Behavior Disorders, October, 1982.

Wood, F. Defining disturbing, disordered, and disturbed behavior. In F. Wood & K.C. Lakin (Eds.), Disturbing, Disordered or Disturbed? Minneapolis: Advanced Institute for Trainers of Teachers for Seriously Emotionally Disturbed Children and Youth. Department of Psychoeducational Studies, University of Minnesota, 1979.

A REBUTTAL TO THE CATEGORICAL POSITION FOR BEHAVIOR DISORDERS

C. Michael Nelson

As is the case with many socio-political issues, it is difficult to assume a polar stance with regard to categorical versus noncategorical programming for students labeled behaviorally disordered or emotionally disturbed. Huntze and Simpson acknowledged that there are points in favor of a noncategorical position, and I must likewise admit to seeing some strengths in the categorical stance. However, I disagree with the fundamental premise that it is moral or beneficial to base a system of human services on identifying and labeling children in a way that can have devastating consequences to their school careers, if not to their lives. I am not saying that behavior disorders, or even emotional disturbances, do not exist. But I do maintain that our present ability to accurately identify children and youth belonging to such a "population," and to provide educational programs based on this diagnosis that are appropriate and helpful, simply does not justify continuation of such practices.

Huntze and Simpson summarized their position through five major points:

1. The political/governmental realities of our society indicate that behaviorally disordered children and youth are best served when they retain visibility as a categorical entity.

2. Quality teacher training is most often synonymous with categorical training; and teacher quality is the most important factor in providing appropriate educational services to behaviorally disordered children and youth.

3. As put into practice by service providers, categorical programs increase availability of services to behaviorally disordered students; reduce inappropriate restrictive placements; are less subject to abuse; and best represent the instructional and identification methods available to us.

4. A cadre of well-trained teachers dedicated to the behaviorally disordered population arises from categorical teacher training and categorical service delivery environments.

5. The categorical position enhances communication among professionals and offers our best hope for the scientific, systematic exploration of behavior disorders, its causes and treatments (p. 52-53).

As Greenough and I observed in our initial paper, support for or against either the categorical or the noncategorical position tends to be based primarily on rhetoric, as opposed to empirical evidence. This certainly holds for Huntze and Simpson's summary points. The argument in favor of a categorical approach amounts to accepting the status quo, which maintains:

1. That children behave differently because they possess underlying process deficits or handicaps which can be reliably diagnosed and used as a basis for differential educational procedures.

2. That we must function within the existing categorical system because it is too big for us to change.

3. That special education functions as a separate educational system with a vocabulary and a technology not used by the regular education system.

I believe that in accepting these assumptions, we abdicate our responsibility as educational leaders and as change agents. Pupils do not have to be labeled in order to be appropriately served. The documented success of such alternative delivery systems as the Consulting Teacher model demonstrates that special education can be provided on the basis of students' functional (i.e., instructional) needs rather than their membership in a broad diagnostic category. Effective teacher training need not be category specific, and teaching is not made more effective by attempting to reduce individual differences through so-called "homogeneous" groupings based on presumed underlying common pupil characteristics.

I concur with Huntze and Simpson that noncategorical teacher training programs have tended to neglect the preparation of teachers to effectively

deal with problem behaviors. However, I do not believe that this failure is attributable to noncategorical teacher preparation per se. There should be a greater emphasis on preparing generic special educators to assess and teach social skills, to manage undesired student behavior, and to function in roles that take them outside the confines of their own classrooms. We at the University of Kentucky found that our trainees did lack these skills and did tend to avoid teaching positions in categorical behavior disorders classrooms. But we were able to correct these deficiencies by strengthening our curriculum in the area of applied behavior analysis and by ensuring that our trainees received practicum experiences in settings where they were required to deal with behavior problems.[1] School districts in Kentucky now are eager to hire our graduates for "behavior disorders" positions, and our graduates are confident in their ability to succeed in such placements. I have seen no research supporting Huntze and Simpson's contention that burnout occurs at higher rates among teachers with noncategorical training. Even if that were the case, it would be stretching the point to relate this observation to the unpreparedness of such teachers to manage problem behaviors.

With respect to Huntze and Simpson's third point, I have seen no evidence that categorical programs increase the availability of services, reduce inappropriate restrictive placements, are less abused, or result in better educational procedures. On the contrary, as Huntze and Simpson themselves

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[1] I heartily agree with Huntze and Simpson that a single generic methods course is inadequate. Our noncategorical program at the University of Kentucky includes three courses entirely devoted to methods: applied behavior analysis, assessment of academic skills, and academic skill instruction. In addition, portions of other courses involve methods of language instruction, due process procedures, working with parents, and methods for working with orthopedically handicapped students. These courses are followed by a one-semester practicum, then the student teaching semester.

pointed out, noncategorical programs were in part a response to the shortage of special education programs for students identified as behaviorally disordered; categorical services for behaviorally disordered students tend toward self-contained and other restrictive settings; and students are less likely to regain admission to mainstream programs after they have been labeled and segregated.

I am more in accord with Huntze and Simpson's last two points. There is a body of literature identified with behavior disorders, and the label has provided a focal point with which practitioners can identify. During my own categorical training, I was exposed to a wealth of information and a number of prominent educational leaders who are identified with the field. I have felt that our noncategorically trained teachers have missed some of the rich background and important historical figures in the area of behavior disorders. However, I also see in categorical training a tendency to repeat the mistakes that have created a large schism between special and regular education; i.e., the development of an esoteric vocabulary and technology within separate special education categories. While such practices may enhance communication and the development of an *esprit de corps* within a categorical field, it hardly facilitates identification with the profession of special education as a whole. I would rather work toward the goal of establishing a common bond among all educators. We should strive for a common language; our technology should be available to all educators. After all, we are in education for the same basic purpose: to facilitate the development of our young people into responsible and informed citizens.

I am sure that some persons reading this will accuse me of naive idealism. To some extent, they may be correct. However, I fail to see that we have done the best that we can in serving the pupils in our schools by increasing

a categorical emphasis, either between regular and special education or within special education itself. The system, after all, is us. If the system cannot be changed, it is because we are unwilling to change it. I hope that is not our fate.

MOVING BEYOND CATEGORICAL PROGRAMS

Karen N. Greenough

Once when working for a community mental health center, a very courteous young man sat in my office questioning me about the type and cost of therapy the center could provide. When I inquired as to the nature of his problems, he told me that he was crazy. When I commented on his appropriate social skills and self-control during our conversation, he offered to demonstrate to me that he was crazy. I quickly assured him that a demonstration was not a prerequisite for receiving services. Since then I have wondered what we require from individuals before special assistance is made available to them within the educational setting. Special services are so often contingent on a categorical label. Even after hearing the eloquent arguments of Drs. Huntze and Simpson in support of the use of categories, I hold the position that the process of categorizing students interferes with the delivery of educational services. Especially of concern to me are the growing numbers of students who are not succeeding in regular education and are being labeled behavior disordered (BD), learning disordered (LD) or educable mentally retarded (EMR). All educators need to be more aware of how over-reliance on categories jeopardizes the delivery of individualized educational services. Completely noncategorical educational services for all children with instruction based on the strengths and needs of the individual may appear to be idealistic. Yet should it not be our shared goal? In our debate Drs. Huntze and Simpson called for a recognition of the realities. I believe that our purpose in identifying the realities should be so that we can assess current practices to have a basis for ongoing improvement of educational services.

An Assessment of Categorical Programs

Since Drs. Huntze and Simpson have already presented a case in favor of categorical programs, that side of the issue will not be restated here. The following problems are ones that I see as part of the reality of special education when educational services are contingent on students matching the criteria for a specific label.

1. Expensive, time-consuming diagnostic procedures are used for classifying children and youth by etiology of their handicap. When states require that students having difficulty in their regular classroom be categorized behaviorally disordered, learning disabled or educable mentally retarded before making changes in their educational program, the inherent assumption is that such differentiations can be reliably made. The reliabilities of the tests used are too low. Although the tests do not provide a sound basis for classifying an individual, the numbers give educators and others a false sense of security.

2. Limited interaction of students judged not handicapped with students judged to be handicapped is reducing the opportunities for learning for both sets of students. Students, who are segregated from ones who have handicaps, may not learn that persons with difficulties in one area have strengths in other areas. Those "normal" students isolated from handicapped students will become adults who are inadequately prepared to develop and evaluate social policies. Also, separate special services have obvious consequences for students with educational difficulties, such as loss of opportunities to learn from more capable classmates through peer tutoring and modeling.

3. Students are not receiving special or supportive services who could benefit from them because they do not meet the criteria for a category or have been placed in a different category. Taking special education to the regular classroom and integrating the resources of both programs has numerous potential benefits for better serving students with mild problems, decreasing the number of referrals from regular classrooms, and increasing the successful reintegration of students from special settings.

4. With an increased number of students categorized, more students may be viewing themselves as "not normal". The large number of children being categorized is directly tied to an increasingly restricted definition of normal academic and social behavior. Although the research on the effects of labeling is not decisive, there is sufficient basis for concern. Few would argue against the admonition to not label

children unless it is the only way to obtain needed services.

5. The labels tend to convince professionals not specifically trained in that categorical area that they are not qualified to serve the students so labeled. Removal of the categorized students for "special" instruction confirms the suspicions of teachers in regular education that such children and youth cannot be taught by them in their classroom.

6. The categories have become barriers between professionals. Those barriers are typically found between "special" and "regular" educators and between professionals in "behavior disorders" and "learning disabilities". Differences have been greatly exaggerated driving from our awareness our shared purpose, overlap in populations served, and similarities in instructional procedures.

7. Hearings and court cases between parents and school systems too often are arising over classification and corresponding placement disputes. Rather, the focus of concern needs to be on the appropriateness of the content and process of instruction.

8. The categories are traps special educators fall into when communicating with other professionals, parents, and legislators. The categories lead to oversimplified and possibly inappropriate decisions regarding children's needs. Labels, such as behavior disorders, are used as shortcuts in communication when descriptions of students' actual behaviors convey more accurate information. Problems to be addressed by educators are those directly related to learning, such as the selection of goals, procedures, materials, and incentives. Performance characteristics of the specific student, not a categorical label, provide the information needed for instructional decisions.

9. Rigid funding structures based on categorical child counts discourage exploration of alternative service systems. Where funding for services is by the number of children served in each category, money to support services not tied to categories is scarce. Our use of categories need not be dictated by law. The categories are used by government officials and staff because we have effectively taught them our terminology. Our job now is to update policy makers concerning the changes that have occurred in what is needed from government to improve service delivery in education.

Advantages of Noncategorical Programming

Immediate removal of categorical programs is not necessary nor a realistic objective. A closer examination of the potential benefits of

noncategorical programming is needed because of the disadvantages of categorical services. Educational systems have tried to provide special services through categorical programs. The movement toward noncategorical services provides examples of what can be done to improve the delivery of special services.

Even though the Regulations for Public Law 94-142 appear to favor a diagnosis and categorization before service delivery in order to receive Federal funds, states such as California provide funds for special services through a generic label, i.e., learning handicaps. In Kentucky, state regulations call for categorical service delivery but systems may devise a variation plan and submit it to the state education agency for approval. The variation plan has become the rule rather than the exception for serving students with mild and moderate educational handicaps. An increasing number of states are also moving toward generic or cross categorical certification programs which would seem to facilitate the movement away from only providing strictly categorical programs.

Noncategorical services are more easily carried out within the regular classroom. When students have been removed for special instruction, the transition back into the regular classroom is apt to be easier. Increased services for a wider variety of students within regular education is more consistent with our espoused values of equal opportunity for all. Also, it is more consistent with the intent of Public Law 94-142, i.e., individualized education in the least restrictive environment. A further consideration is the efficiency of providing services through the regular educational program whenever possible. Students in resource programs and part-time special classes lose direct instruction time and have considerable time spent in transition because of the movement between programs. Transfer of learning is augmented by the individualized instruction occurring within the regular

setting where the student needs to succeed. The teacher in the regular classroom should have the opportunity to see students' responses to the materials and approaches used by the "special" teacher. When a specially trained teacher comes into the regular class to work for a short time with a few students, exchanges of information between teachers can occur more naturally and on a more regular basis. Each is able to get feedback and ideas from the other. Students not labeled handicapped can benefit from instructional procedures and use of incentives that make their way into the regular class through the presence of the special instruction for classmates. Through consultation with special teachers, the regular class teacher may be able to prevent labeling and segregated instruction for some students through early intervention within the regular program and setting.

Conclusion

The terms behavior disorders, learning disabilities and mental retardation effectively communicate a variety of learning problems that can be grouped together. The terms allow educators to focus on an area in which a student has difficulties within the educational environment. What is not conveyed by our use of categorical labels is that two students may have behavioral deficits and excesses that are referred to as behavior disorders, but the two students may or may not have similar problems in social skills, task related behaviors, and academic skills. The problem is not the term behavior disorders. The problem is that the term is superimposed on multidimensional individuals as a prerequisite to special instruction. Too often the term also decreases the opportunities for a student to receive additional or different instruction in academic areas. For students diagnosed learning disabled, it is presumed that training in social skills or task related

behaviors is not needed even though characteristics such as distractibility are frequently cited for students placed in learning disabilities programs.

An injustice is done to children and youth most in need of alternative instructional approaches when educators limit students' opportunities to learn by placing them outside of the regular class and providing services limited to the assumptions called forth by the label behavior disorders, learning disabilities or educable mentally retarded.

The goals for all educators, whether working in a program called regular education or special education, are to:

1. Bring resources to the regular classroom including para-professionals and specially trained consultants;
2. Reduce the size of regular classes;
3. Explore alternative physical arrangements, instructional materials, and teaching methods in the regular class before sending a child away from the regular class;
4. Work with the family and community to alleviate situations contributing to students' difficulties and increase the opportunities for students to learn outside of the school setting; and
5. Join forces to obtain community and governmental support for ongoing change and exploration in education.

Consistent with movement toward these goals is the movement toward noncategorical service delivery to all students who encounter difficulties in their school environment. Rather than identifying ourselves and students as members either of special or of regular education, as being learning disabled or behaviorally disordered, educators can act for education of all children. As members of one profession, our shared purpose is to improve services throughout education.

PERSONAL RESPONSE TO THE ISSUE OF NONCATEGORICAL VS. CATEGORICAL EDUCATIONAL PROGRAMMING

Sharon L. Huntze

Introduction

When presenting a particular point of view and/or philosophical perspective, one is responsible for presenting the entire "case," from its strongest to its weakest points. Thus, as Dr. Simpson and I approached our task of presenting the categorical philosophy as it relates to programming for behavior disordered students, we tried to include all the reasons and beliefs of various persons who advocate that stance. While I strongly subscribed to some of the points raised, I was less committed to others. Similarly, while I disagree strongly with some points made by Nelson and Greenough, there are others with which I concur. One of the strengths of this document is that it has simultaneously allowed for a thorough discussion of both "sides" of an issue and also provided for some melding of those discussions by allowing individuals to discuss a position that is not totally aligned with either "side." I have approached this task in two ways. First, there is discussion concerning the categorical philosophy and the support for it as perceived by this author. The second part is a similar discussion concerning aspects of the noncategorical perspective that this author supports. This is an information discussion designed to share some personal bias that resulted from the experiences of the debate and the preparation of the categorical paper. The resource material for the following discussion is cited in the major documents and their bibliographies.

The Categorical Philosophy

Behavior Characteristics

While few would argue with the premise that mildly handicapped students (i.e., behavior disordered, learning disabled, and educably mentally retarded)

exhibit many of the same behaviors, it appears to be an accurate reflection of the reality I have experienced that there are also some behaviors specific to each population. Whether by virtue of the type, degree, frequency or range of the behaviors in question, behavior disordered students do present a set of unique behaviors as well as those behaviors that overlap with the other two handicapping conditions. Certainly, differences in type of behavior (no matter how few) as well as the degree, frequency and range of those behaviors constitute significant variables for educational programming. In that event, behavior disordered students require two things:

(1) A greater emphasis on some of the teaching strategies that might be needed by all mildly handicapped students; and

(2) Some teaching strategies seldom needed by other mildly handicapped students.

Thus, it appears to me that most behavior disordered students are more likely to be successfully programmed for in an environment in which focus can be placed on the strategies most likely to be needed. That does not, of course, indicate that some behaviorally disordered children cannot be appropriately programmed for in some noncategorical service delivery environments.

The implications of that belief for teacher training are obvious. While most any arrangement that teaches the "in common" methods to behavior disordered teachers would seem viable, it would also follow that there is a need for one or more behavior disorders specific "methods" courses and behavior disorders specific theory courses, housed in a categorical degree program that results in categorical teacher certification. That combination of events, it seems to me, is most likely to result in the best possible services to students who are handicapped by virtue of their behavior in the present educational system.

Abuse of the Noncategorical System

One of the biggest concerns I have about noncategorical service delivery

(which consequently results in my categorical leaning) is the rampant abuse of that method of service delivery. While it is also true that categorical programs are abused, I feel that the noncategorical are more so. There are many such abuses, but space constraints permit an examination of only two here:

(1) In practice, most noncategorical programs are no such thing. They are multicategorical and that constitutes a significant difference. Rather than identifying students with mild learning and behavior problems that fall, in theory, within certain parameters, they are programs that take children previously labeled as behaviorally disordered, learning disordered, and educably mentally retarded, often without regard for the range and intensity of some concerns and place all those students in one classroom, generally resource, but oftentimes self-contained in name or practice. Some teachers may, with enough experience, innate ability, and administrative support be able to serve those children well. I am convinced that in the vast majority of cases, these students cannot have their needs met. They would be far better off in categorical services where more focus can be placed on the issues most prevalent for that population.

(2) I am also convinced that the majority of noncategorical (multicategorical) service delivery arrangements that have been implemented have not been implemented based upon philosophical commitment to the noncategorical philosophy, or even with much attention to it. Rather, they have been implemented for administrative convenience, allowing local education agencies to place inappropriately diverse students in a single program setting and to assign any teacher in the district to that classroom. To the extent that this has occurred, there has been little regard for student needs, teacher expertise or long-range planning. Even if one were wholeheartedly committed to noncategorical service delivery, that type of abuse negates any value to the student or the local education agency.

Diagnosis

Finally, an argument often raised in noncategorical support is that we do not have the diagnostic specificity to divide the mildly handicapped into groups by handicap. Therefore, we should not attempt it until and if we do have more diagnostic specificity. I would argue the opposite. Until we do have that specificity, it is even more important to group according to

primary problems in behavior, learning and capacity. When and if such specificity arises, we will truly be able to segregate those who, regardless of problems with capacity, learning or behavior, exhibit roughly the same types, frequency, degree and range of problems and can be dealt with in a single learning environment from those students whose problems of type, frequency, etc. require groupings based on their behavior, learning, and capacity.

The Noncategorical Perspective

Change vs. the Status Quo

In the first place, I cannot agree strongly enough with a point made by Nelson and Greenough that "how things are" is never an adequate justification for their retention. Rather, "how things should be" must always be our goal. Thus, no argument around the "status quo" advantages of the categorical philosophy really holds sway for me. How things should be must always drive us. To that end, I share the philosophy that says all of education must move toward the goal of meeting children's needs. Historically, special education has often become the place to put children who are not meeting the school's needs; and in some cases, the range of the school's needs is narrow, indeed.

Further, I endorse the need for change in the "social fabric;" and Nelson and Greenough make the point that education changes the culture. While that may be true, so is the reverse. Education is also a reflection of that culture. Thus, overall change is very slow and not simply a matter of altering the social fabric by altering education. While I am perfectly willing to spend my life trying to change that social fabric as well as education, I also accept that in my life I will not see radical change in either. Until that time I must try to serve students in the manner that best meets their needs under conditions as they are. Perhaps we are simply not yet caring enough or sophisticated enough to make the noncategorical philosophy work on a

large scale in our schools.

Training Redundancy

Teacher training programs that are totally categorical appear to me to be redundant and wasteful of limited human resources. However, while I do not know percentages, I must also point out that many categorical training programs result in categorical degrees, but also contain from 3 to 20 hours of noncategorical methods coursework. That certainly represents recognition that many teacher competencies overlap among the mildly handicapping conditions.

Hostile Labeling

Categories or divisions organized around labels clearly result in a situation in which most observers place the problem within the child thereby negating the environment's responsibility for the problem. No one who has worked, as I have in a program which evaluated both child and environment following referral, can long believe that most of the problems children experience in public schools are "within them." As many (probably more) of the problems were clearly the result of inappropriate, non-supportive, narrowly defined and/or hostile environments. The unfairness of labeling and placing a child as a result of problems created for that child by the environment is overwhelmingly tragic. I do believe that the existence of labels and categories, regardless of their intent, make it easier for the above chain of events to occur. If there are labels, it is reasoned, there must surely be students who belong under them by virtue of an inadequacy in them. It might be helpful to provide services (i.e., new environments) to children and youth based upon the classification (and labeling) of their current environment. If nothing else, it might help to put the whole classifying, labeling process in perspective.

Summary

Frankly, I believe that in an educational system that: 1) is concerned only about what is best for a child; 2) evaluates children and environments; and 3) carefully individualizes all services, noncategorical programming would represent the best alternative for mildly handicapped students. However, I also believe that as long as: 1) environmental "needs" are allowed precedence over child needs; 2) the cost of services is of more concern than quality of service; and 3) compliance is valued over appropriate educational programming, categorical services will afford the best opportunity for the behaviorally disordered child.

I wish to be clear about the latter point. It is not that I believe that all local education agencies are committed to denying appropriate services to behaviorally disordered students. While I have met those that are, the majority of local education agency personnel with whom I have worked are attempting to provide what students need. However, the complexity of so vast a system of public education that is only one part of an extensive "social fabric" faces a difficult and tortuous journey in its attempt to appropriately educate all children and handicapped children in particular.

Thus, until and unless enough changes occur within the social fabric and within education, I think that behaviorally disordered children and youth have their best chance in categorical service delivery environments that can, at the very least, provide a successful experience and focus on the specific behaviors that resulted in the placement.

A REBUTTAL

Richard L. Simpson

By its very nature, a debate demands that its participants promote extreme positions and forego compromise and mid-course solutions, regardless of the logic of such a strategy. With regard to the present issue, that educational programming for behaviorally disordered pupils is best accomplished within a noncategorical framework, Dr. Huntze and I presented our negative position with a fervor far exceeding our actual attitude. Yet, in spite of a willingness to temper many of our comments and our overall extreme position, I remain a moderate proponent of a categorical model for serving the educational needs of behaviorally disordered children and youth. This position will be clarified below, particularly as it relates to the affirmative pose of Drs. Greenough and Nelson.

Labeling and the Negative Social Status of Handicapped Children and Youth

While the affirmative team strongly emphasized that categorical programs perpetuate the prejudicial and baneful labeling of children and youth, in actuality, there is no evidence that this process is categorically aligned. Yet, there is consensus and empirical support for the theory that handicapped children and youth, including the behaviorally disordered, are assigned relatively low status positions by their nonhandicapped peers, regular classroom teachers and staff, and other persons with whom they come into contact. As observed by Weintraub and Abeson (1976):

> Mankind's attitudes toward its handicapped population can be characterized by overwhelming prejudice. The handicapped are systematically isolated from the mainstream of society. From ancient to modern times the physically, mentally, or emotionally disabled have been alternatively viewed by the majority as dangers to be driven out, or as burdens to be confined . . . Treatment

> resulting from a tradition of isolation has been invariably unequal and has operated to prejudice the interests of the handicapped as a minority group (p. 7).

And yet, this unfortunate pattern has consistently been shown to be independent of whether or not a handicapped pupil is assigned a label by the professional community. As observed by Meyerowitz (1965), handicapped children "whether in regular or special class, were more likely to be known but less likely to be interacted with, either positively or negatively, than normal children" (p. 249). Hence, while much has been said and written about the harmful influence of labeling handicapped pupils, including the behaviorally disordered, little empirical evidence exists in favor of this position and even less support for the contention that categorical programs for behaviorally handicapped pupils serve to facilitate this allegedly baneful process. This absence of empirical evidence must not be interpreted to mean that no contingencies are associated with the erroneous and indiscriminate labeling of children and youth who manifest atypical behavior patterns. Likewise, appropriate labels, when applied in a professional and ethical manner, must not be judged to be routinely detrimental. Further, labeling which is undertaken to facilitate the placement of a pupil in a categorical program, when such a disposition is in his/her best educational interests, must not be tainted by the emotionality, values, and discord of other relatively incidental and paltry matters.

Negative Perceptions of the Behaviorally Disordered

While the significance of labeling must not be overlooked, it is becoming increasingly apparent that other factors must take precedence in the controversy over educational placement of handicapped students. First, it must be recognized that behaviorally disordered and other mildly handicapped pupils are primarily perceived negatively because of their behavioral excesses and

deficits rather than as a result of labels assigned to them by educators and other professionals. Thus, Wilson (1970) suggested that teachers wishing to aid handicapped pupils become more accepted must remember that these students "are generally unaccepted because of bothersome, inappropriate, or antisocial behavior . . . or simply an absence of positive likeable traits and behavior" (p. 204). Accordingly, it is logical that educators who wish to serve the best interests of behaviorally disordered pupils must provide for alternatives which most effectively decrease excesses and remediate deficits rather than engaging in meaningless arguments over whether or not professional labeling, which may be nothing more than a positive by-product of providing deserving students with the most acceptable services available, may be harmful. By taking this stance, educators are in a much better position to select options (whether these be categorical, noncategorical or some other delivery models) that best suit a given student's needs rather than being contaminated by variables that are irrelevant to a student's education and social acceptance. Further, this approach allows us to consider labeling in a more realistic and balanced fashion as opposed to allowing it to take on the form of a philosophical and indomitable entity.

Remediation of the Negative Social Status of the Behaviorally Disordered

Another aspect associated with the labeling issue should also be considered. That is, in fact, educators are willing to acknowledge that handicapped pupils, including the behaviorally disordered, are poorly accepted and understood by their nonhandicapped peers, regular teachers, administrators and most other societal groups, and if this lack of acceptance has not been shown to be a function of a labeling process, educators must make specific efforts to facilitate the understanding and acceptance of exceptional persons.

While this approach may appear overly simplistic, it represents a sensible and pragmatic problem-solving approach which may circumvent a number of the pitfalls associated with the labeling issue. In particular, educators who are sincerely interested in facilitating the acceptance and understanding of behaviorally disordered pupils in public school settings (regardless of whether the pupils are placed in categorical or noncategorical programs) might consider disseminating information about exceptional persons to regular-class students, parents, regular teachers, and other groups who have contact with the exceptional population. Cognitive information that has effectively been used to improve the image and understanding of the handicapped includes discussion of a) the concept of individual differences; b) common handicapping conditions (including behavioral and emotional disorders) and their characteristics; c) curricula and strategies used to train and educate the handicapped; d) well-known individuals who have had to contend with a handicapping condition; e) acceptable ways of interacting with handicapped pupils, especially those with behavioral excesses and deficits; and f) opportunities for recipients of the information to discuss and react to the information and their feelings about behaviorally disordered students.

While the above suggestions are not intended to be comprehensive or to serve as easy solutions to an extremely difficult problem, they reinforce the following point. That is, since labeling has not been shown to be detrimental in and of itself, efforts must be made to address and remediate those specific problems that impact on behaviorally disordered pupils. Such efforts appear more productive rather than attempting to apply all available resources to unravel the various components and subcomponents of this complex issue, particularly when doing so may be totally independent of the problems which require immediate attention.

Summary

In summary, the question of whether or not it is most efficient and effective to serve the educational needs of behaviorally disordered pupils via noncategorical programs can only be determined through a continued empirical examination of the relevant issues. However, the issue is sufficiently complex so that a single factor (i.e., labeling), particularly when that variable is unsupported by empirical evidence, must not constitute the sole basis for an argument or decision. Further, the categorical/noncategorical question must ultimately be dealt with by means of empirical comparisons. Before this can be accomplished, however, it is necessary for proponents and practitioners of noncategorical programs to remediate at least the most obvious deficiencies of this model. In this manner, comparisons can be made on the basis of program elements rather than shortcomings only marginally related to the model. Only such a strategy will provide an atmosphere conducive for valid efficacy studies.

REFERENCES

Meyerowitz, J.H. The neighborhood sociometric. Appendix F of Goldstein, H., Moss, J.W., & Jordan, L.J. The efficacy of special class training on the development of mentally retarded children. Cooperative Research Project No. 619, University of Illinois, 1965.

Weintraub, F.J., & Abeson, A. New education policies for the handicapped: The quiet revolution. In F.J. Weintraub, A. Abeson, J. Ballard, & M. LaVor (Eds.), Public policy and the education of exceptional children. Reston, Virginia: Council for Exceptional Children, 1976.

Wilson, W. Social psychology and mental retardation. In N.R. Ellis (Ed.), International review of research in mental retardation (Vol. 4). New York: Academic Press, 1970.